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UNFPA

UNITED NATIONS POPULATION FUND
PROPOSED PROGRAMMES AND PROJECTS

Recommendation by the Executive Director
Assistance to the Government of Angola
Support for a comprehensive population programme

Proposed UNFPA assistance:	$8.5 million, of which $7 million would be committed from UNFPA's regular resources. If UNFPA's funding situation permits, the balance of up to $1.5 million may be provided by UNFPA. If and to the extent this is not the case, UNFPA would seek to cover the shortfall from other sources, including multi-bilateral sources.
Estimated value of the Government's contribution:	To be determined
Duration:	Five years
Estimated starting date:	January 1991
Executing agencies:	Government of Angola United Nations United Nations Educational, Scientific and Cultural Organization (UNESCO) United Nations Children's Fund (UNICEF) United Nations Population Fund (UNFPA)
Government co-ordinating agency:	National Development Council (CONADE)

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ANGOLA

Demographic facts

Population Total (000)	
Total	10,020
Males	4,936
Females	5,084
Sex ratio (/100 females)	97.1
Urban	2,836
Rural	7,184
Per cent urban	28.3
Population in year 2000 (000)	13,295
Functional age groups (%)	
Young child: 0-4	18.3
Child: 5-14	26.6
Youth: 15-24	18.7
Elderly: 60+	4.9
65+	3.0
Women: 15-49	22.7
Median age (years)	17.5
Dependency ratios: total	92.1
(/100) Aged 0-14	86.2
Aged 65+	5.8
Agricultural population density (/hectare of arable land)	1.76
Population density (/sq.km.)	8
Average annual change (000)	
Population increase	302
Births	503
Deaths	200
Net migration	0
Annual population total (% growth)	2.81
urban	5.41
rural	1.68
Crude birth rate (/1000)	46.6
Crude death rate (/1000)	18.6
Net migration rate (/1000)	0.0
Total fertility rate (/woman)	6.31
Gross reproduction rate (/woman)	3.11
Net reproduction rate (/woman)	2.16
Infant mortality rate (/1000)	127
Life expectancy at birth (years)	
Males	44.9
Females	48.1
Both sexes	46.5
GNP per capita (U.S. dollars, 1987)	*

Sources: Population density on arable land is derived from two publications issued by the Food and Agriculture Organization of the United Nations: FAO Production Yearbook 1985 and World-wide Estimates and Projections of Agricultural and Non-Agricultural Population Segments 1950-2025, ESS/MIS/86/2; gross national production per capita: World Bank, World Development Report 1989. Figures for population, total population by sex, population by age group, age indicators, urban-rural population, and population density (/sq. km.) refer to the year 1990; figures for average annual change, rate of annual change, and fertility and mortality are the five-year averages for 1990-1995. These data are from the Population Division, Department of International Economic and Social Affairs of the United Nations, World population prospects: 1988.

* World Bank data not avilable.

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I. SUMMARY

1. The United Nations Population Fund (UNFPA) proposes to support a population programme in the amount of $8.5 million, of which $7 million would be committed from UNFPA's regular resources, over a five-year period, starting January 1991, to assist the Government of Angola in achieving its population and development objectives. If UNFPA's funding situation permits, the balance of up to $1.5 million may be provided by UNFPA. If and to the extent this is not possible, UNFPA would seek to cover the shortfall from other sources, including multi-bilateral sources. This would be the third population programme of Angola, and would coincide with the Government's national development plan, 1991-1995. The second programme, approved in 1987 in the amount of $4 million, will end in December 1990.

2. The proposed programme is based on the findings and recommendations of a UNFPA multi-sectoral Programme Review and Strategy Development (PRSD) Mission which visited Angola in August 1989. The mission found that the country was at a beginning stage in its population activities. The main objectives of the proposed programme would therefore be to assist the Government in: (a) creating awareness of the country's population situation among selected target audiences, especially political leaders and leaders of mass organizations; (b) strengthening the Government's institutional capability to integrate population variables into development planning, particularly in terms of human resources; (c) drawing upon the newly-strengthened institutional capability so as to lay the foundation for the development of a population policy; (d) increasing the knowledge base in demographic statistics and in the interrelationships between population and development for use in development planning and awareness-creation activities; (e) decreasing infant and maternal mortality and the incidence of teen-age pregnancy; and (f) improving health and living conditions of families through expansion of improved maternal and child health and family planning (MCH/FP) services and the promotion of family life and sex education.

3. The programme would concentrate on three major sectors: (a) the preparation of a foundation for the development of a population policy based on a better understanding of the interactions between demographic and socio-economic variables; (b) the expansion of integrated MCH/FP services with emphasis on improving the quality of such services; and (c) the promotion of population and family life education concepts through their incorporation into the formal educational system and the outreach activities of mass organizations, notably, the Organization of Angolan Women (OMA), the Party's Youth Organization and the Trade Union. Emphasis would be given to the development of human resources across all sectors. Both technical and managerial skills would be developed in all mininistries concerned, mass organizations and other entities. Data gathering and analysis would be reinforced not only in support of the development of policy but also to guide the formulation of strategies for MCH/FP, population information, education and communication (IEC) and the women's sector.

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4. All projects under the proposed programme, as in all UNFPA-assisted programmes, would be undertaken in accordance with the principles and objectives of the World Population Plan of Action; that is, that population policies should be consistent with internationally and nationally recognized human rights of individual freedom, justice and the survival of national, regional and minority groups (para. 14 (d)); that respect for human life is basic to all human societies (para. 14 (e)); and that all couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so (para. 14 (f)).

II. BACKGROUND

5. With the vast amount of natural resources it possesses, among which are oil (the mainstay of the economy), diamonds and iron ores, Angola is classified among the lower-middle-income countries. This, however, does not reflect adequately the social, economic and demographic situation of the country. The economy, for example, is suffering from major dislocations that have been occurring since the country attained independence in 1975. For one thing, the departure of massive numbers of Portuguese settlers led to a shortage of trained and skilled manpower at all levels of the economy. For another, continuing civil strife has absorbed a sizable proportion of the country's human and financial resources. In addition to the loss of human life and the destruction of infrastructure, the civil war has caused a massive rural-to-urban migration of approximately 650,000 people. This has resulted in considerable pressure on social and health facilities and a general degradation of the sanitary and environmental conditions in cities. This is particularly notable in Luanda, the nation's capital, whose population has doubled since 1983.

6. Demographic and health indicators have also deteriorated: according to the latest reports from the World Bank and other donors, maternal mortality is estimated at 600 per 100,000 births; infant mortality at 170 per 1,000 live births* and mortality for children between one and five years of age at 290 per 1,000. These figures are only gross indications, however, since techniques for gathering data are unreliable and information on certain segments of the population is unavailable. The problem is compounded because of large variations among geographic areas. Information on the health care system is also generally unreliable. Officially, there are 59 hospitals, 223 health centres and 1,320 health posts, that is, a total of 1,602 health units. However, the number of those currently functioning is not known, and public access to those that are functioning depends on shifting military positions. There are 738 physicians in Angola, most of them expatriates, while the number of nurses is estimated at 6,600.

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* Estimates of demographic indicators from various sources may differ from the United Nations projections provided in the demographic facts sheet on page two of this report.

7. Knowledge of demographic trends is also fragmentary. The last comprehensive population census was held in 1970 when the country was still under colonial rule. A census conducted in 1983 covered only 8 of 18 provinces and some major cities. According to projections based on these partial data, the population was almost 9 million in 1987, with an annual rate of growth of 2.7 per cent. Analyses on these data, conducted by the National Institute of Statistics, indicate a total fertility rate in the range of 8 to 8.8 children per woman. Adolescent pregnancies are on the rise, and there is almost one child born for every two women in the 15-19 age bracket.

8. The education system faces severe problems resulting from the departure, at Independence, of most of the country's qualified teachers. They were replaced by teachers who for the most part had completed only the first four years of primary school. There thus remains a large need for qualified and additional full-time teachers at all levels. Although primary education is compulsory and free, in 1984 the gross enrolment rate at primary schools was only 43.7 per cent. Still, school enrolment is increasing, and this has made it necessary to establish a shift system in the schools. This has resulted in a short school day for students (four hours daily per child) and a high student/teacher ratio.

9. The Government is committed to improving the conditions of women, as stipulated in the 1989-1990 Economic Recovery Plan. The State Secretariat of Social Affairs is responsible for programmes to promote the status and role of women. The Organization of Angolan Women, a mass organization with more than 1 million members, has been instrumental in bringing about important changes in Angolan laws to enhance the status of women, including the introduction into the Constitution of equal rights for both genders, the promulgation of the Family Code and the inclusion of maternity leave in labour legislation. OMA has also been the most influential force in promoting family life, sex education and family planning in the country. OMA, which collaborates closely with the Ministry of Health, mobilizes women through its extensive local-level network and refers them to family planning service units.

10. The Government is also strongly committed to population as an integral component of development planning. Indeed, in its 1989-1990 Economic Recovery Plan, the Government has defined broad objectives with reference to two demographic variables, namely reduction of mortality and control of internal migration. The Government has expressed interest in setting up a population unit within the Ministry of Planning to integrate population variables into its development plans. Family planning is officially accepted for health reasons. The commitment to family life and sex education which is under the leadership of mass organizations is quite impressive, and these concepts are promoted regularly on the national radio.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

11. In 1987, the Governing Council approved a second programme of UNFPA support to Angola for 1987-1990 in the amount of $4 million. Initially, $2.6 million was to come from regular UNFPA resources, while the remainder was to come from other sources, including multi-bilateral sources. The largest portion, $1.3 million, was intended for continued support of MCH/FP services, followed by support for three projects in population education and communication. Other components of the planned programme were the completion of the analysis of 1983-1984 census data, the collection of new data for use in regional development planning and the initiation of projects for strengthening demographic training at the national university, improving civil registration, and conducting management training for women.

12. It was not possible to undertake a population needs assessment in Angola in preparation for the 1987-1990 country programme. The programme did, however, take into account the realities of the Angolan situation by including training components in all proposed projects so as to address known shortages of qualified staff. Three projects included plans for socio-cultural studies, and several others made use of mass organizations as channels for population education and communication activities. Emphasis was placed on women's concerns and on creating awareness of population issues.

13. In financial terms, the implementation of the programme has been satisfactory. Expenditures and allocations for 1987-1990 total $3.2 million, all from UNFPA's regular resources. A large proportion of the funds, as foreseen in the programme, have been used for MCH/FP activities ($1,362,690).

14. A review of the substantive implementation of the programme reveals a less encouraging picture. It must be kept in mind, however, that several factors constrained both the planning and implementation of projects. These included, among others, the continuing war situation, which has severely drained the Government's limited human and financial resources, and the general lack of management capacity in the country. Furthermore, the lack of population experience combined with the absence of a UNFPA office in the country have hindered the initiation and continued follow-up of project activities.

Maternal and child health and family planning

15. The previous UNFPA-sponsored project in MCH/FP in Angola ran from 1985 to 1987 and was executed by UNICEF. That project was continued in 1988 under the Government's direct execution. It is scheduled to end in 1990. The principal conclusion to be drawn about both projects is that in this brief span, they contributed significantly to the legitimization of, and creation of demand for, family planning services. This accomplishment alone would be important given

the much longer time required to achieve these ends in many other countries. The projects have also contributed to creating a vision of how the quality of MCH care could be improved in the Angolan context.

16. Even more impressive gains could have been achieved, however, had flaws in the design been discerned at the time of project formulation. Perhaps the first such error was not to specify quantitative objectives in terms of service points to deliver MCH/FP services. Plans were not prepared to ensure that service points would open at the same pace as MCH/FP trainees were produced. As a result, the number of centres currently offering integrated MCH/FP services is only 18 (of 1,600), this number having increased by only three during the current project. Also, because of inadequate planning some of the centres were not established at the optimum locations, thus reducing their impact. Along the same lines, the growth of the service network was affected because of the Government's reluctance to place equipment in unsecured service points.

17. Apparently, no guarantee was obtained from the Government that the 10 persons trained as trainers would be recognized and given trainer's status afterwards. To date only one of these trainers is performing this function in a systematic way, and thus the anticipated "multiplier effect" of the training has been minimized. A conceptual error may also have occurred when United Nations Volunteers (UNV) were proposed to assist in the National Training Centre courses and help trainees to establish service points in the provinces. Given the difficulties that the UNV programme has had in identifying volunteers for Angola, and the lack of adequate supervision of provincial service points by Luanda-based personnel due to transport problems, a better strategy may have been to train provincial teams of nationals who would then take charge of establishing MCH/FP networks.

18. The MCH/FP project was also intended to improve the management information system (MIS) through developing the capacity for collecting and analyzing MCH/FP statistical data. In hindsight, this strategy may have been flawed in that it ignored the fact that all service statistics flow to the Planning Office of the Ministry of Health, where some capacity for analysis already exists. Rather than trying to build capacity in the MCH/FP Unit where none was available, it would have been better to strengthen the capacity in the Planning Office. UNFPA has allocated $1,362,690 to this project (1987-1990) in support of long-term advisory services, overseas training in management of the MCH/FP programme, and various other services and materials including the organization of local seminars and workshops, the renovation of service points, and the provision of vehicles, data processing and office equipment, contraceptives, and essential drugs.

Information, education and communication

19. The 1987-1990 country programme included $1 million in support of population and family life and sex education projects to be conducted through radio

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programmes, literacy programmes and the schools. None of these projects were implemented. The mass media education and in-school projects were both formulated, but due to lack of follow-up and consultation between the ministries concerned, the proposed United Nations executing agencies and UNFPA, no project activities were inititated. No action was taken with regard to the literacy programmes.

Basic data collection and analysis and population dynamics

20. In the areas of population data collection and analysis and population dynamics, the 1987-1990 programme was to include three components: improving the civil registration and vital statistics system; reinforcing the teaching of demography at the Agostinho Neto University; and undertaking demographic analysis for use in regional development planning. The civil registration project was considered too ambitious in the context of the difficult conditions in the country, and therefore was not approved by UNFPA. The project for reinforcing the teaching of demography at the University, in the Faculties of Medicine, Economics and Architecture, was approved in June 1989, but took off only in early 1990 with the arrival of the international adviser. However, fellowships for study abroad were started in 1989. This project, which contains interesting and innovative aspects, aims to create multi-disciplinary interactions useful for conducting socio-cultural, economic and demographic research studies. UNFPA allocated $452,000 to the project for 1989-1990 to cover the costs of long-term advisory services, fellowship training, two vehicles, data processing, and office and audio-visual equipment.

21. The main achievements of the project to undertake demographic analysis for regional development planning include the establishment of a population documentation centre open to the public. A Demographic Analysis Unit was also established within the Demographic and Survey Department of the National Institute of Statistics. Under the project, a number of cadres from various ministries received training abroad. The project has created a wide interest in population studies and has paved the way for the establishment of a population and development unit in the Ministry of Planning.

22. However, the main immediate objective of the project was to produce demographic data and analysis through surveys in order to complement the partial census carried out in 1983-1984. Outside the descriptive analysis of demographic and socio-economic characteristics, these components advanced very little. The project may have been too ambitious for the time allotted, and it failed to give importance to the analysis of data already available. An important lesson which will be taken into account in the proposed programme is that overseas training should be complemented by in-country follow-up of the trainees by the relevant institutions. UNFPA's contribution amounted to $612,688 from 1987 to 1989 in support of two long-term advisers, a United Nations volunteer, overseas training in demographic analysis and population and development, participation in international conferences on population, two vehicles, data processing, and audio-visual equipment.

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Women, population and development

23. The ongoing population programme made provision of $240,000 for assistance to the Organization of Angolan Women, mainly to strengthen the OMA training centre in the southern province of Huambo. Unfortunately, the project never materialized because of the war situation in the province.

Other external assistance

24. Apart from UNFPA, the only other organization providing direct population assistance to Angola is the International Planned Parenthood Federation (IPPF). Although there is no Angolan affiliate of IPPF, since 1987 this organization has been providing support of $300,000 each year to Angola through the Ministry of Health, OMA and the Youth Organization. About one-third of this amount is used for contraceptives, while the remaining amount is used for family planning awareness-creation activities and for training.

25. Other donors contributing to population-related programmes include, in the health sector, UNICEF and the Swedish International Development Authority (SIDA). UNICEF has the second largest programme among the United Nations organizations, after the World Food Programme (WFP), and it allocated a total of $18.5 million, including multi-bilateral funds, in 1988. The health programme received the largest part of this sum. The development assistance programme of SIDA for 1989-1990 is about $52 million, of which almost 25 per cent is intended for the health sector, focusing on training of health personnel and on primary health care.

26. UNDP's programme in Angola amounts to $28 million for 1987-1991, distributed over an array of different projects. UNDP is supporting the macro-economic planning in the Ministry of Planning, to include strengthening of the statistical system. The request for the latter includes a household survey, but without any demographic components, and it has been suggested that UNFPA consider funding such components.

27. Angola became a member of the International Monetary Fund and the World Bank in 1989. The World Bank is at present identifying areas for support. Its preliminary recommendations for a first programme (to be committed by mid-1990) focus on infrastructural support to health and primary education in the southern provinces. Other major donors in Angola include the European Economic Community and the Government of Italy, which have provided some assistance to rehabilitate hospitals, and WFP, which donated more than $20 million in 1989 (including multi-bilateral funds). The World Health Organization (WHO) concentrates its support on strengthening the overall management of the health system. A programme which addresses the acquired immune deficiency syndrome (AIDS) has recently been initiated in Angola with WHO assistance.

IV. PROPOSED PROGRAMME 1991-1995

28. For the preparation of the third population programme of assistance to the Government of Angola (1991-1995), a UNFPA Programme Review and Strategy Development Mission was fielded in Angola from 6 August through 1 September 1989. The mission found that Angola was at a beginning stage in developing its population activities. The country has no explicit population policy but has declared the broad objectives of reducing mortality and controlling rural-to-urban migration, along with plans for the re-configuration of the country's spatial redistribution, especially in the south-western region.

29. Further formulation of policy is hampered by the general lack of population and development data. This lack of data, coupled with a lack of qualified professionals in the population sector, has contributed to a limited awareness of the interaction between demographic and socio-economic variables. A clear illustration of this is the general perception among government officials that once the civil war ends, expected economic growth would adequately accommodate any increase in population growth. However, simulation studies carried out in 1988 by a major donor agency concluded that economic growth would be constrained by a number of factors and would only equal the growth of the population, thus failing to produce a sufficient per capita surplus to raise general living conditions.

30. Family planning is officially accepted for health reasons but is available in only 18 to 20 service points around the country. Commitment to family life, sex and family planning education is quite impressive among the leaders of various mass organizations. These concepts are promoted regularly through programmes on national radio, although more innovative methods need to be investigated in order to reach the population more effectively. Incorporation of population, family life and sex education concepts into formal schooling has yet to begin although the Government now appears committed to the idea.

31. All areas of population activities may be characterized as being held back by the drain on financial and human resources caused by the civil war and the acute shortage of technical and managerial personnel. The lack of co-ordination between and within ministries and donors and the general lack of a planning tradition in the country also hamper activities.

32. In the population sector, the Government has identified a number of issues and has included relevant policies to address them: the reduction of infant, child and maternal mortality and morbidity through improvement of health services at all levels; promotion of community education programmes incorporating health education and family planning for the health of mothers; improvement of the social conditions of women; control of rural-to-urban migration; and return of Angolans living abroad. Other population concerns have been reflected in policies enunciated by the ruling party and its affiliated mass organizations and have been promoted by sectoral ministries. Among these are child spacing

for health and social reasons, reduction of the growing prevalence of teen-age pregnancy and of the incidence of induced illegal abortion, and an increase in family life and sex education.

33. The UNFPA mission made recommendations to the Government that were discussed with the representatives of both the Government and mass organizations. The proposed programme is based on the agreement reached therein. The main objectives of the programme would be: (a) to create awareness of the country's population issues among political leaders and leaders of mass organizations; (b) to strengthen the Government's institutional and technical capability to integrate population variables into development planning, particularly in terms of human resources; (c) to draw upon the newly-strengthened institutional capability so as to lay the foundation for the development of a population policy; (d) to increase the knowledge base in demographic statistics and in the interrelationships between population and development; (e) to decrease infant and maternal mortality, as well as the incidence of teen-age pregnancy; and (f) to improve the health and living conditions of families through expansion of improved MCH/FP services and promotion of family life and sex education.

34. The programme would concentrate on three major sectors: (a) developing a framework for a population policy; (b) expanding and improving integrated MCH/FP services; and (c) promoting family life and sex education concepts by incorporating them into the formal educational system and into the outreach activities carried out by mass organizations. The family life education programme of the national radio would be made more attractive through innovative programming.

35. High priority would be placed on the development of human resources, both technical and managerial, in all areas of population assistance provided by UNFPA. Given the limited experience of skilled personnel already in post, all new projects would require a large component of technical advisory services, mostly through use of resident experts. Such advisers would be required to provide effective in-service training of their national counterparts. Long-term overseas training in demography would have to be followed up by in-country visits by representatives of the training institutions. Demographic, population and development training would be incorporated into the curricula of as many existing university and technical school programmes as possible.

Maternal and child health and family planning

36. In the area of MCH/FP, UNFPA would assist the Government in significantly expanding the network of integrated MCH/FP services. For planning purposes, the target would be to accomplish this for half of the existing network by 1995. To that end, UNFPA would assist in conducting an inventory/assessment of existing health centres, health posts, and maternity wards, covering such areas as the physical condition of the buildings, accommodations for delivery of services, equipment on hand and that needed, and training needs. Provision would be made

to renovate some of these health facilities. Equipment for infant, maternal and family planning care would then be provided.

37. To ensure expansion and better quality of services, emphasis would be given to in-service training of nurses in MCH/FP. This would include sensitization of nurses to the special reproductive health care needs of adolescents and to the role that MCH providers can and should play in preventing sexually transmitted diseases, including AIDS. The number of in-service courses at the UNFPA-supported training centre in Luanda would be increased in order to train 60 nurses per year, more than double the present number of 24 per year. At the provincial level, five similar centres would be set up to re-train 250 nurses annually. UNFPA assistance would also be used to update existing training and supervision manuals as well as to develop new ones. Efforts to strengthen the management and supervision of integrated MCH/FP services would be supplemented by training overseas. As a result of these efforts, it is expected that 500 mid-level nurses would be providing MCH/FP care by the end of 1995.

38. To improve the logistics of MCH/FP service delivery, the proposed programme would seek to maximize collaboration with UNICEF as the executing agency for the procurement and distribution of equipment, contraceptives and essential drugs. Short-term consultancies to improve logistics and the management information system would also be required. Because of the lack of human resources for implementing and managing an integrated MCH/FP programme, long-term technical assistance would be required at the central level for the duration of the programme, along with the use of United Nations Volunteers as trainers and supervisors at provincial levels.

39. UNFPA assistance to the MCH/FP sector would be in the amount of $2.4 million. Additional sources of funding in the amount of $1 million would be required. In view of the significant assistance received in this area from a multitude of donors, UNFPA would make every effort to co-ordinate its assistance with that of the other donors in order to avoid duplication of efforts and to maximize resources.

Information, education and communication

40. The UNFPA programming mission reported on the growing demand for information on human sexuality and family planning. Since the enrolment rates in schools are low and the drop-out rate high, and since only a small proportion of women complete their secondary education, priority would be given to out-of-school educational activities and to information and communication outreach, including use of mass media and interpersonal modes of communication. The primary objective of the IEC activities would be to provide informational and educational support for efforts to reduce the incidence of teen-age pregnancy, abortion and maternal mortality. UNFPA proposes to provide $2 million for this sector, $1.5 million of which would be provided by UNFPA regular resources. The bulk of this would be used to develop projects in the non-formal sector.

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41. Non-formal IEC. UNFPA would support comprehensive training of group leaders already active in non-formal education, as well as the staff of the State Secretariat of Social Affairs, in family life and population education, including family planning. This would include training in communication skills as well as in the production of appropriate didactic materials. UNFPA assistance would be used both to provide adequate supervision and monitoring to strengthen trainees' ability to convey educational messages and to establish mechanisms that would tie in IEC activities in the non-formal sector with the formal education programme to ensure that parents and others concerned would be informed of the objectives and content of family life and sex education. It would be essential to co-ordinate these activities with MCH/FP projects so as to ensure that services would be able to provide for the demand created.

42. A project to support national radio would be an important part of the UNFPA-supported programme. Such a project would give priority to, and provide short-term consultants for, population awareness creation and the training of radio staff in innovative ways of integrating population concerns into family life and sex education programmes. Basic equipment such as recording tapes and monitors would be needed for the training activities. A subsequent activity would be a larger scale project to increase the rural population's access to such radio programmes through collective radio listening at radio posts located in market places, clubs and other commmunal areas. UNFPA support would be needed for short-term consultants to develop programmes and to train promoters, as well as for the equipment needed at the listening posts, for in-country travel by promoters, and, possibly, for a technical adviser.

43. Given the dearth of socio-cultural knowledge on which to base programmes, UNFPA would also support socio-cultural research studies and, whenever possible, training in basic research methodology for professionals attached to projects. In addition, post-graduate training in population IEC would be supported in order to build up the research capacity in the national university.

44. Formal education. UNFPA proposes to support an in-school family life education (FLE) project for the second and third levels of primary schools as well as for teacher training institutes. This project was formulated under the second programme, although it was never implemented. Because of the lack of expertise in this field, long-term advisory services would be needed. Moreover, the project would provide for a fellowship in FLE for a full-time staff of the National Sex Education Commission; for the inclusion in the project of a logistics mechanism to ensure that materials produced reach all target groups; and for the expansion of the content to include population and environment issues. The project would prepare the groundwork for the extension of these activities to the first level of primary school. UNESCO would be responsible for executing the project.

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Basic data collection and analysis

45. UNFPA support to this sector would be used to improve the collection, analysis and dissemination of population and demographic data. As indicated earlier, there is an urgent need to further analyze 1983-1984 census data. This would be done by reinforcing the technical capability of the National Institute of Statistics to collect and analyze demographic data through the training of its personnel and through the provision of micro-computers and software for demographic analysis. UNFPA would also help the Institute to develop the capacity to execute demographic household surveys. This would require technical assistance, as would related efforts to strengthen the Institute's cartographic unit. UNFPA would take special care to co-ordinate the funding of these components with that of other donors, notably UNDP and SIDA, which have already been approached by the Government concerning assistance to the National Institute of Statistics. UNFPA would provide an amount of $600,000 to support activities in this sector, with the United Nations serving as executing agency.

Population policy formulation

46. High priority would be given to help the Government lay the foundation for developing a population policy. This is particularly important given the demographic changes that will inevitably take place when the civil war ends. In order to facilitate the integration of population variables into development planning, UNFPA would assist the Government in setting up a population and development unit within the Ministry of Planning and in training larger numbers of personnel from the Ministry in population and development, primarily at specialized institutions abroad. A resident expert would be engaged for at least three years to advise on the unit's institutional structure and to train staff to help strengthen all sectors involved in organizational and managerial matters. Data-processing equipment would be purchased and population research studies commissioned.

47. UNFPA's contribution would be $700,000. This would cover, in addition to the above activities, the cost of organizing population awareness seminars for political leaders and leaders of mass organizations, as well as planners and decision-makers in the sectoral ministries.

Population dynamics

48. UNFPA would continue its assistance to strengthen the integration of demographic modules into the curricula of the Agostinho Neto University, notably in the Faculties of Economics, Medicine and Architecture. The current project, which will end in 1990, would be extended through the new programme cycle. As the project progresses, staff would explore the feasibility of expanding it to other faculties, including, among others, Social Sciences, Geography and Anthropology, once such faculties are established in the university system. The

project would also include additional fellowships for the study of demography and population and development at the master's level to be obtained at specialized institutions overseas. Collaboration with such specialized institutions would be maintained for exchange of experiences, the sharing of training materials and curricula, as well as for in-country follow-up of the trainees. International expertise would be needed for at least one additional year during the new programme cycle to help consolidate and institutionalize the training courses, to evaluate materials and research methodologies and to develop new ones. Special consideration would be given to training in micro-computer simulation programmes, since such programmes are extremely useful in illustrating population dynamics.

49. In addition, activities would be initiated to set up an interdisciplinary population research centre within the Agostinho Neto University to conduct studies on the interplay between demographic and socio-economic variables needed to guide policy formulation. Such a centre would promote interaction between economists, demographers and researchers from other disciplines, thereby enriching population-related studies in the process. In this regard, two fellowships at the doctoral level, to be taken at appropriate institutions abroad, would be funded. In support of the above population dynamics activities, UNFPA would provide $800,000 in assistance to this sector with the United Nations as the executing agency.

Women, population and development

50. As already mentioned, the Organization of Angolan Women is the main organization dealing with women's issues and undertaking various activities to improve women's conditions. OMA's educational activities in the field of family life and sex education have been successful and will receive support from UNFPA in line with the description made above. However, OMA's experience in developing income-generating activities has been very limited. At least in the first part of the new programme, UNFPA's support to the women's sector would concentrate on specific action programmes such as supporting workshops and overseas training of OMA's cadres with the aim of strengthening the organization's managerial and administrative capacity, including project design and implementation, at central and provincial levels. UNFPA would provide assistance in the amount of $200,000 for these activities.

Programme reserve

51. An amount of $800,000 would be held in reserve for new proposals that may be developed within the framework of the proposed programme. With the emphasis placed on developing human resources, direct support to training activities of various kinds might be necessary. As such, a separate project for fellowships could be developed with funds from the programme reserve.

Programme co-ordination

52. The Department of International Organizations of the Ministry of Foreign Affairs is responsible for mobilizing and co-ordinating external assistance to the country. However, there is little communication between donors in Angola. In the context of the funding of this third population programme, UNFPA would assist the Government in establishing a mechanism to co-ordinate population assistance activities. The setting up of a UNFPA office in Luanda would facilitate this initiative. In the MCH/FP sector, UNFPA will maintain contact with SIDA and UNICEF on a regular basis. Moreover, close co-ordination with SIDA and UNDP will be essential in carrying out the proposed demographic household survey.

Programme monotoring, evaluation and management

53. All projects developed in the sectors described above would have built-in monitoring and evaluation components; major projects, however, would also be scheduled for independent evaluation. On the part of UNFPA, the proposed programme would be managed by a Country Director supported by a National Programme Officer and a secretary in the newly established UNFPA local office. The UNDP Resident Representative, who also serves as the UNFPA Representative, would provide overall guidance and promote co-ordination with other United Nations agencies. In view of the expansion of the proposed programme, UNFPA might consider strengthening its new office with the recruitment of additional staff, an International Programme Officer or a Junior Programme Officer. The office would be equipped with a micro-computer in 1990 through the Fund's office computerization project.

Financial summary

54. As noted in paragraph 1, UNFPA proposes to support a programme of $8.5 million, of which $7 million would be committed from UNFPA's regular resources. If UNFPA's funding situation permits, the balance of up to $1.5 million may be provided by UNFPA. If and to the extent this is not the case, UNFPA would seek to cover the shortfall from other sources, including multi-bilateral sources. This UNFPA commitment to the Government of Angola for the five-year period 1991-1995, by project area, subject to the availability of funds, is as follows:

	UNFPA regular resources $	Other resources $	Total $
Maternal and child health and family planning	2,400,000	1,000,000	3,400,000
Information, education and communication	1,500,000	500,000	2,000,000
Basic data collection and analysis	600,000	-	600,000
Population policy formulation	700,000	-	700,000
Population dynamics	800,000	-	800,000
Women, population and development	200,000	-	200,000
Programme reserve	800,000	-	800,000
TOTAL	7,000,000	1,500,000	8,500,000

V. RECOMMENDATION

55. The Executive Director recommends that the Governing Council:

(a) Approve the programme for Angola in the amount of $8.5 million for the five-year period 1991-1995;

(b Authorize the Executive Director to commit an amount of $7 million from UNFPA's regular resources;

(c) Further authorize the Executive Director to provide the balance of up to $1.5 million from UNFPA's regular resources, if such resources are available. If and to the extent they are not, further authorize the Executive Director to seek to cover the shortfall from other sources, including multi-bilateral sources;

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d) Authorize the Executive Director to allocate the funds and make appropriate arrangements with the Government of Angola and with the executing agencies.

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UNITED NATIONS POPULATION FUND
PROPOSED PROGRAMMES AND PROJECTS

Recommendation by the Executive Director
Assistance to the Government of Cuba
Support for a comprehensive population programme

Proposed UNFPA assistance:	$4 million
Estimated value of the Government's contribution:	To be determined
Duration:	Five years
Estimated starting date:	January 1990
Executing agencies:	Government of Cuba World Health Organization/Pan American Health Organization (WHO/PAHO)
Government co-ordinating agency:	State Committee of External Co-operation

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CUBA

Demographic facts

Population Total (000)	
Total	10,324
Males	5,248
Females	5,076
Sex ratio (/100 females)	103.4
Urban	7,736
Rural	2,588
Per cent urban	74.9
Population in year 2000 (000)	11,189
Functional age groups (%)	
Young child: 0-4	7.6
Child: 5-14	14.2
Youth: 15-24	21.2
Elderly: 60+	11.9
65+	8.4
Women: 15-49	28.1
Median age (years)	28.3
Dependency ratios: total	43.4
(/100) Aged 0-14	31.3
Aged 65+	12.0
Agricultural population density (/hectare of arable land)	0.67
Population density (/sq.km.)	93
Average annual change (000)	
Population increase	93
Births	167
Deaths	75
Net migration	0
Annual population total (% growth)	0.88
urban	1.59
rural	-1.41
Crude birth rate (/1000)	15.9
Crude death rate (/1000)	7.1
Net migration rate (/1000)	0.0
Total fertility rate (/woman)	1.71
Gross reproduction rate (/woman)	0.83
Net reproduction rate (/woman)	0.81
Infant mortality rate (/1000)	13
Life expectancy at birth (years)	
Males	73.1
Females	76.8
Both sexes	74.9
GNP per capita (U.S. dollars, 1987)	*

Sources: Population density on arable land is derived from two publications issued by the Food and Agriculture Organization of the United Nations: FAO Production Yearbook 1985 and World-wide Estimates and Projections of Agricultural and Non-Agricultural Population Segments 1950-2025, ESS/MIS/86/2; gross national production per capita: World Bank, World Development Report 1989. Figures for population, total population by sex, population by age group, age indicators, urban-rural population, and population density (/sq. km.) refer to the year 1990; figures for average annual change, rate of annual change, and fertility and mortality are the five-year averages for 1990-1995. These data are from the Population Division, Department of International Economic and Social Affairs of the United Nations, World population prospects: 1988.

* World Bank data not available.

I. SUMMARY

1. The United Nations Population Fund (UNFPA) proposes to support a comprehensive programme in the amount of $4 million over a five-year period, starting January 1990, to assist the Government of Cuba in achieving its population and development objectives. The proposed programme has been designed to complement the country's population and development strategies and priorities.

2. UNFPA's fourth programme of assistance to Cuba is based on an evaluation of the 1986-1989 programme of UNFPA assistance; a document prepared by the Government describing the country's population situation and its needs for international assistance; and a programming mission carried out by UNFPA in October 1989. The proposed programme addresses the most pressing population problems identified by the Government, namely, the high rate of unwanted pregnancies ending in abortion and an imbalance in labour distribution caused by internal migration.

3. The main objectives of the proposed country programme for 1990-1994 would be: (a) to establish a national integrated information system, disaggregated by sub-region, by gender and by type of data (demographic, economic and social) and to incorporate such data in the planning of development programmes in order to respond adequately to local needs; (b) to bring about a distribution of population adequate to accommodate regional socio-economic development through the formulation of regional population policy recommendations; (c) to decrease unwanted pregnancies through the provision of maternal and child health and family planning (MCH/FP) programmes focused on high-risk groups; and (d) to improve information, education and communication (IEC) activities directed at both men and women to enhance their ability to regulate fertility in a responsible way, focusing programmes on specific high-risk groups.

4. All projects under the proposed programme, as in all UNFPA-assisted programmes, would be undertaken in accordance with the principles and objectives of the World Population Plan of Action; that is, that population policies should be consistent with internationally and nationally recognized human rights of individual freedom, justice and the survival of national, regional and minority groups (para. 14 (d)); that respect for human life is basic to all human societies (para. 14 (e)); and that all couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so (para. 14 (f)).

II. BACKGROUND

5. Demographic indicators in Cuba have reached levels comparable to those of developed countries. According to United Nations population projections, the country's population in 1990 totaled 10.3 million, with an annual population increase of 0.88 per cent. The most important factor influencing the country's

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population increase in recent years has been the combination of a crude birth rate of roughly 18 per 1,000 population and a stable crude death rate since 1980 of 7 per 1,000 population. Net migration, according to government sources, has also remained steady since the beginning of the decade at around 10 per 1,000 population. As regards population density, 20 per cent of the population is concentrated in Havana Province, and the pace of urbanization in Cuba is accelerating.

6. The general fertility rate in Cuba has decreased since 1985, when it reached its highest rate of 66.1 per 1,000 population, to 64.1 in 1988. The total fertility rate (TFR) increased during the first five years after the 1959 Revolution, reaching 4.72 children per woman in 1963. After a steady decline (the TFR reached its lowest level in 1981 at 1.61), it then increased again, reaching 1.7 by 1990. There has also been a significant change in the average age of mothers, who are becoming markedly younger year by year. As a result, each year since 1978, fertility among females 14-19 years of age has been systematically higher than that of those in the 20-24 and 25-29 year age groups. In 1987, the 14-19 age group accounted for 27 per cent of all pregnancies in Cuba. The decline of fertility throughout the country has also been accompanied by a narrowing of the differences in fertility rates between urban and rural areas and among provinces. In 1990, the net reproduction rate was 0.81 per woman.

7. The Cuban age structure indicates a process of an increasingly aging population. The 60-plus age group increased from 9.0 per cent of the population in 1970 to 11.9 per cent in 1988. Projections indicate that this age group will constitute 13.4 per cent of the population in the year 2005. The median age, 27.7 years in 1970 and 30.4 years in 1988, will be 34.7 years by the year 2000. This process has been influenced by the decrease in fertility rates and improvements in the quality of life of the people.

8. According to the Government, in 1988, Cuba had the lowest infant mortality rate in its history, 11.9 per 1,000 live births, a 38.3 per cent decrease from the rate in 1979. Maternal mortality has also been decreasing steadily, from 70.4 per 100,000 births in 1979 to 26.1 in 1988. Life expectancy has increased from 70 years in 1969-1971 to 74.9 for both sexes in 1990. According to a fertility survey carried out by the State Committee of Statistics in 1987, 78.1 per cent of Cuban women of reproductive age use some form of contraception.

9. Cuba has a centrally planned economy that is heavily dependent on the production and export of sugar, tobacco and nickel. The current economic situation of the country, which has been affected by adverse conditions both nationally and internationally since 1985, is expected to continue as is to at least the end of 1990. The pattern of Cuba's economic growth in the near future will be determined largely by the performance of the Cuban sugar industry and by the world sugar market. Other key factors will be the maintenance of long-term bilateral trade agreements with the Union of Soviet Socialist Republics

(USSR) and other members of the Council of Mutual Economic Assistance (CMEA), the continuation of low-interest aid from the USSR, the gradual expansion of export commodities in addition to sugar, and an increase in trade with Western economies. The slowing down of the growth of Cuba's global social product (GSP) in the late 1980s was due to three factors: extreme weather conditions (Hurricane Kate); an increased burden of debt servicing in convertible currencies; and the planned reduction of subsidized petroleum imports from the USSR. While the Government of Cuba has been able to improve the country's economy in many ways and to establish the basis for more fundamental development, Cuba is limited in its raw materials and, therefore, dependent on the foreign sector for assistance.

10. Cuba's national educational system provides comprehensive educational services for all citizens free of cost. As a result, Cuba has essentially been able to eliminate illiteracy. In the area of health, Cuba has a national health system which provides services to the entire population. The cornerstone of this system is the concept of community medicine, of which the major component is community participation. One of the priorities in improving health care has been the area of maternal and child health. Success in this area has been demonstrated by a steady decline in the deaths of both mothers and babies during childbirth (and correspondingly in overall rates of infant and maternal mortality) and an increase in visits to health clinics of women during pregnancy and of mothers with children under age one. Another crucial aspect in improving health levels has been the raising of nutritional levels of the people through a policy that stresses equitable distribution of essential foods to the most vulnerable sectors of the population.

11. Cuba does not have an explicit population policy. However, since 1959, the Government has been taking steps in its development strategies which conform to implicit policies on population in the areas of health (reducing infant mortality and fertility rates and improving nutritional levels); education (raising the educational level of the people); urbanization (developing new communities and new industrial centres which affect migration and the spatial distribution of the population); and housing construction (attempting to resolve a serious housing shortage). That the Government actively pursued these development priorities amid considerable adversity demonstrates its commitment to social development.

12. In Cuba, family planning activities are an integral part of the country's maternal and child health care programme. The extension of this programme since 1960, in terms of both quality of services and the number of women reached, has made it possible to offer Cuban women the opportunity of regulating fertility. Thus, Cubans consider family planning programmes as contributing to the improved health of women and helping them to make informed decisions about their own fertility. Such decision-making is facilitated by the Cuban Constitution and the Family Code, which grant women the same rights and opportunities as men in the economic, political, social, and family spheres. Moreover, the health

authorities are interested in advising people of the most efficient contraceptive methods to use if they want to avoid undesired pregnancies. This has resulted in a continued decline in the number of abortions relative to the number of live births.

13. As regards population, the Government is seriously concerned about three problems in particular: the high rate of unwanted pregnancies resulting in abortion; internal migration resulting in an imbalance of the labour force distribution; and an increase in the aging population. To solve these problems the Government will increase its efforts to adapt national policies to regional characteristics in order to respond more adequately to local needs. In this context, the Government's population priorities include improving the collection and analysis of demographic, economic and social data, disaggregated by region, as a basis for formulating population policies that would respond adequately, and in a more decentralized way, to local needs. The Government also wants to continue to improve the health service system by emphasizing family planning programmes as well as education.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

14. During the 1974 World Population Conference in Bucharest, Romania, representatives of the Government of Cuba and UNFPA signed a country agreement for a four-year programme of UNFPA support. The country agreement became operational in 1975. The programme objectives were: to increase coverage of maternal and child services; to reduce the frequency of abortion while increasing family planning services; to improve coverage in the collection, processing and publication of vital statistics; to train medical personnel in the fields of demography and population studies; and to study the relationships between components of population dynamics and socio-economic variables. The programme was extended until June 1979, when a second four-year programme (1979-1982) was approved by the Governing Council. A new component was added to support the 1981 population and housing census. In 1981 the project budgets were revised, extending the programme by three years.

15. On the basis of the findings and recommendations of a mission that reviewed the 1982-1985 programme, UNFPA continued assistance with a third programme covering a four-year period, 1986-1989. Under this programme, UNFPA concentrated its assistance in the areas of family planning services and population and communication, with additional support to training and research aimed at the further integration of population factors into the planning and implementation of socio-economic development plans. Total UNFPA assistance to the Government of Cuba from 1975 through 1989 was $10.9 million.

16. An evaluation of the third UNFPA-funded programme, carried out in 1988, indicated the progress made in each sector and UNFPA's vital role in financing essential components of these projects that were beyond the Government's capacity. Progress by area is as follows.

Maternal and child health and family planning

17. UNFPA supported the Government in its efforts to reduce unwanted pregnancies by providing effective and safe contraceptive methods through training of health personnel, research, technical assistance and equipment. The Fund also supported the introduction of MCH/FP and sex education into the family doctor system at 17 selected polyclinics and 600 consulting units. A special effort was made to improve production facilities at a pharmaceutical plant so as to be able to increase the volume, quality and diversity of oral contraceptives produced locally. Partly as a result of UNFPA assistance the general fertility rate decreased from 66.1 per 1,000 population in 1985 to 64.1 in 1988. There was also a drop in the rate of abortion from 49 per 100 pregnancies in 1986 to 45 per 100 pregnancies in 1988. However, the rate of abortion continues to be very high and constitutes a priority concern of the national health authorities. Teen-age pregnancy fell from 33 per cent of total pregnancies in 1986 to 27 per cent in 1988, and contraceptive use among women of reproductive age increased from 67 per cent in 1986 to 78.1 per cent in 1988. Indeed, the introduction of MCH/FP training and the supply of equipment into the family doctor system contributed to decreasing teen-age pregnancy to 21 per cent of total pregnancies in the project area. The technical assistance given to the pharmaceutical plant not only helped to increase the volume of the production of oral contraceptives, but also proved that in order to produce a stable amount of oral contraceptives and to improve quality and diversity, the construction of a new pharmaceutical plant was needed. With UNFPA's support all feasibility studies to construct this new plant have been carried out. However, the unavailability of contraceptives continues to be the main weakness of the family planning programme in Cuba.

Information, education and communication

18. In this area, UNFPA supported the National Centre for Sex Education, which serves as an advisory body to the National Assembly of Popular Power as well as to various ministries and mass organizations. UNFPA assistance was directed towards the strengthening of sex education at all levels of the educational system, training of professionals and political groups, and developing educational programmes for the mass media. As a result of this assistance, sex education has been introduced into the national educational system, a research study of factors influencing teen-age pregnancy has been conducted, educational messages have been broadcast on radio and television and printed in magazines, and the co-ordination of the activities of the Centre with all institutions involved in this area has been strengthened. However, the evaluation components of the educational programmes have been rather weak, and there is a need to design appropriate methodologies to provide information regarding programme effectiveness.

Data collection and analysis

19. Assistance in this area was provided to conduct a fertility survey at the national level to be used in the development of the national health programme and the sex education programme and to prepare population projections while enhancing the national capacity to carry out periodic surveys of the same nature. The information obtained from this first fertility survey conducted in Cuba, whose results were published in 1988, has contributed to the understanding of the sustained decline in fertility rates and of the interrelationship between fertility and development planning, particularly in relation to the socio-economic characteristics of the various sub-regions of the country. The survey was conducted by the State Committee for Statistics, which is responsible for centralizing the preparation and dissemination of official statistics.

20. The Latin America Demography Centre in Santiago, Chile, and in San Jose, Costa Rica, has played an important role in providing technical assistance for the collection, processing and analysis of statistical data primarily through training and consultation. However, data have not been disaggregated by province or by municipality sufficient to satisfy many centralized planning purposes or to accomodate local planning. Also, there are too few analysts for the many tasks that have to be done, and there is a need to incorporate new techniques and technologies into current planning procedures.

Population dynamics

21. UNFPA supported the Centre for Demographic Studies Unit (CEDEM) under the Faculty of Economic Sciences at the University of Havana. The assistance was provided to contribute to the integration of population factors into development planning mainly through training and development of research studies. This assistance has helped to define the complex relationship between demographic information and socio-economic planning. Moreover, the Centre has played a pioneering role in the application of a methodology for storage and retrieval of bibliographic data. The Centre forms part of the National Research Programme that provides information needed to respond adequately to priority national problems. The Centre has also provided valuable support for the development of a project designed to limit migration from a mountainous area. As a result of UNFPA assistance in this area, CEDEM has been able to organize an international training programme on population and development which is operating successfully. However, the Centre has had problems meeting training demands in Cuba and other countries due to the small number of professionals on its staff.

Other external assistance

22. WHO, WHO/PAHO and the International Planned Parenthood Federation (IPPF) have provided assistance to Cuba for population and related activities. WHO has supported research in such areas as the safety and efficacy of various methods

of fertility regulation, as well as the behavioural and social determinants of fertility regulation. WHO/PAHO has supported MCH activities aimed at improving and protecting the health of mothers and children. And IPPF has provided contraceptive supplies and services through its national affiliate, the Cuban Society for Family Development.

IV. PROPOSED PROGRAMME 1990-1994

23. The proposed programme has been designed to complement and supplement the Cuban Government's population priorities and strategies. It is based on the findings and recommendations of the evaluation of the 1986-1989 country programme; a document prepared by the Government describing the country's population situation and its need for international assistance; and a programming mission carried out by UNFPA in October 1989.

24. The proposed fourth country programme would assist the Government of Cuba in: (a) establishing a national integrated information system, disaggregated by region, by sex and by type of data (demographic, economic and social) in the planning of development programmes in order to respond adequately to local needs; (b) bringing about a distribution of population adequate to accommodate regional socio-economic development needs through the formulation of regional population policy recommendations; (c) decreasing unwanted pregnancies through the provision of maternal and child health and family planning programmes focused on high-risk groups; and (d) improving information, education and communication activities directed at enhancing the abilities of both men and women to regulate fertility in a responsible way, focusing these programmes on specific groups at high risk.

25. The programme objectives would be achieved through the implementation of two basic strategies: (a) adaptation of national development plans to regional characteristics, providing assistance to improve the technical and analytical capacity at local levels so that national development plans can be implemented locally according to regional population characteristics (provincial or municipal); and (b) concentration of the MCH/FP programme activities among high-risk groups within the 11-19 age group. The 11-19 age group is particularly important in the success of family planning efforts in Cuba because: (a) there are more Cubans in this age group (18.44 per cent) than in any other age group; (b) it is within this age group that most Cubans enter into their first union; and (c) the unavailability of contraceptives in Cuba has resulted in a high proportion of unwanted adolescent pregnancies ending in abortion. Therefore, there is a need to look more closely at this age group in order to identify characteristics of specific groups at high risk so as to be able to plan activities accordingly and increase programme effectiveness.

Maternal and child health and family planning

26. As part of the MCH/FP activities of the proposed programme, research studies would be developed in the areas of fertility and abortion at the

beginning of the programme in order to identify those at highest risk among the 11-19 age group. The following groupings would be given particular attention: (a) women who use contraceptives correctly but the contraceptive method fails; (b) women who use contraceptives incorrectly due to personal factors such as forgetfulness or inconsistency of use and/or to external factors such as lack of availability of the method used; and (c) women who are sexually active and do not use contraceptives. These studies would allow the development of more precise programmes based on the characteristics of each group identified.

27. UNFPA would also assist the Government of Cuba in consolidating and strengthening the infrastructure of the health system by increasing coverage of the family doctor system. This system, which currently is available to slightly less than half of the population, consists of one doctor and one nurse living in a community of 120 families, of which they are the focal point for physical, social and psychological aspects of health care. They work closely with the families and the community, involving them in the solution of health problems. This system has proved to be successful because it enables medical personnel to deliver health services at the community level and guarantees continuity and privacy of the services, factors that are of vital importance in the adequate provision of family planning services.

28. Assistance would be provided to help improve national contraceptive technology, with the overall objective of contributing to Cuban self-sufficiency in the production of oral contraceptives. This is doubly important because the trade embargo currently in force against Cuba limits the possibilities for importing contraceptives. Ensuring a timely supply of a variety of contraceptives and in sufficient quantities continues to be one of the chief problems confronting the MCH/FP programme in Cuba. It is very important, therefore, to support Cuba's efforts to produce contraceptives nationally and to help solve the problem of insufficient supplies of contraceptives, which in turn affects all other strategies seeking to reduce the number of unwanted pregnancies.

29. UNFPA would also provide assistance to design a methodology to measure the impact of the strategy to decrease unwanted pregnancy among those in the 11-19 age group. This process would involve the identification of valid indicators of progress, the elaboration of methods to measure each of the indicators identified, and a pilot test of the evaluation study. The actual evaluation would be carried out nationally during the last year of the programme. UNFPA would provide continuous technical assistance throughout all phases of the process.

30. UNFPA proposes to provide an amount of $2 million for the MCH/FP sector. WHO/PAHO would serve as executing agency and provide technical assistance.

Information, education and communication

31. Assistance would be provided to improve educational programmes that foster responsible reproductive behaviour in men and women. This would be done primarily by directing educational messages to those groups identified as being at highest risk. In Cuba, the education sector is of paramount importance in influencing behaviour, in particular as regards attitudes towards family planning. However, education programmes have traditionally been directed at the general population. There is, therefore, a need to design and implement specific educational methodologies that take into account the characteristics of those groups at high risk. In addition, in order to ensure the optimal effectiveness and impact of such methodologies, the programme would have a built-in evaluation process. UNFPA would provide technical assistance in the form of experts in population information, education and communication who would assist in the development of research and the training of professionals in charge of the design, implementation and evaluation of education programmes. UNFPA assistance to this sector would amount to $1 million. WHO/PAHO would serve as the executing agency of the training component of the projects.

Basic data collection and analysis

32. UNFPA would assist Cuba in establishing a national integrated information system disaggregated by province, by gender and by type of data (demographic, economic and social) for use in defining policies and in development planning. The Government of Cuba has striven to generate information required for development planning. As a result, the country has ample information that has been provided by numerous sources, including the Population Census of 1981, a sophisticated vital statistics system, household surveys, and specific studies in relation to characteristics and trends of demographic variables. However, this information is essentially descriptive rather than analytical, and there is now a need to provide significant information regarding determinant factors of demographic variables and their effect on development. The study of the interrelationship between demographic behaviour and socio-economic variables both at the national and regional level would provide a base for understanding the dynamics of the demographic process in Cuba, as well as the formulation of suitable population policies to be implemented according to the specific characteristics of each region. The population census scheduled for 1992 would provide the basic data of such an integrated information system which in turn would provide a basis for the comprehensive analysis of each of Cuba's provinces. It is expected that this integrated system of information by region would facilitate the dissemination and utilization of population information and analysis by local groups. UNFPA assistance to this sector would amount to $400,000, to be used for technical assistance, training of national personnel and equipment. The Government would execute this project.

Population dynamics

33. The proposed programme would assist in the development of a study of population settlements and urban processes, the findings of which would be used to help define the type and geographical focus of development plans that would contribute to a more balanced distribution of the population. Havana Province is the country's most densely populated area, with 20 per cent of the Cuban population concentrated there. It is followed by the provinces of Holguín and Santiago de Cuba, which have population densities of 105.7 inhabitants per square kilometre and 158.8 per square kilometre, respectively. At present, the urban population of Cuba is growing at a rate of 1.6 per cent annually. This contrasts sharply with the rate of growth in rural areas, where the population is decreasing each year by 1.4 per cent. The Government is very much concerned with this imbalance and would like to design a strategy to formulate a National System of Population Settlements that would consider appropriate models of urbanization in conjunction with other development policies. UNFPA assistance would help to support that effort.

34. UNFPA assistance would also be provided for formulating regional population policy recommendations, developing research projects and training professionals and students involved in national and regional planning, as well as in the field of population and development. In view of the complexity of Cuban population dynamics and of the country's social and economic processes, it will be necessary to carry out an in-depth study of these interrelated factors before formulating explicit regional population policy recommendations. The Centre for Demographic Studies of the University of Havana would assist the Government in conducting such a study. UNFPA proposes to provide $500,000 in assistance for this sector. In addition to the activities described above, UNFPA would also assist the Government in strengthening the national technical capacity for the formulation of population policy recommendations.

Women, population and development

35. The Cuban Women's Federation has been one of the main groups involved in formulating the proposed programme. Thus, all aspects of the programme take into account and respond to issues and concerns of Cuban women. In addition, the Cuban Women's Federation participates actively in all the institutions that would be involved in the execution of this programme, thereby guaranteeing that all projects would be sensitive to gender considerations.

Programme reserve

36. A programme reserve of $100,000 would be established to cover yet undetermined needs that may come up during the programme.

Programme monitoring and evaluation

37. The programme would be monitored and evaluated in accordance with established UNFPA procedures and guidelines. Progress reports and annual tripartite project reviews would thus be planned by UNFPA and the Cuban Government. The programme would also be subject to a mid-term review and an independent in-depth evaluation to be carried out at the end of the programme.

Programme management and co-ordination

38. The Cuban Government would execute this programme in co-ordination with WHO/PAHO, which would serve as the executing agency for the technical assistance and training component in the health area. The Ministry of Health and the State Committee of External Co-operation have assigned national personnel to be in charge of administration and monitoring of the programme to ensure that programme activities are effectively implemented and co-ordinated with the UNFPA Resident Representative and the UNFPA Country Director. The addition of a National Programme Officer would further contribute to the successful implementation of the programme. The programme would provide a vehicle for implementing an agreement between UNFPA and the Government of Cuba on technical co-operation among developing countries (TCDC). Under this agreement, the Government will provide technical assistance to other developing countries in the area of population and development.

39. The proposed UNFPA programme is complementary to the activities developed by other agencies in the country. For example, UNFPA assistance would complement WHO/PAHO's programme to improve and extend measures for the promotion, protection and recovery of the health of mothers and children. The same is true for the United Nations Children's Fund (UNICEF) programme of oral rehydration and the World Food Programme (WFP) project to improve the health of mothers and children through the provision of essential foods.

Financial summary

40. As indicated in paragraph 1, UNFPA proposes to support a programme in the amount of $4 million over a five-year period (1990-1994). The breakdown by work-plan category is as follows

	UNFPA regular resources $
Maternal and child health and family planning	2,000,000
Information, education and communication	1,000,000
Data collection and analysis	400,000
Population dynamics	500,000
Programme reserve	100,000
TOTAL	$ 4,000,000

V. RECOMMENDATION

41. The Executive Director recommends that the Governing Council:

(a) Approve the programme for Cuba in the amount of $4 million for the five-year period 1990-1994;

(b) Authorize the Executive Director to allocate the funds and make appropriate arrangements with the Government of Cuba and with the executing agencies.

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UNITED NATIONS POPULATION FUND
PROPOSED PROGRAMMES AND PROJECTS

Recommendation by the Executive Director
Assistance to the Government of Indonesia
Support for a comprehensive population programme

Proposed UNFPA assistance:	$25 million, of which $22 million is to be committed from UNFPA's regular resources. If UNFPA's funding situation permits, the balance of up to $3 million may be provided by UNFPA. If and to the extent this is not the case, UNFPA will seek to cover the shortfall from other sources, including multi-bilateral sources.
Estimated value of the Government's contribution:	To be determined
Duration:	Four years
Estimated starting date:	January 1991
Executing agencies:	Government of Indonesia United Nations
Government co-ordinating agencies:	National Family Planning Co-ordinating Board (BKKBN) State Ministry of Population and Environment

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INDONESIA

Demographic facts

Population Total (000)	
Total	180,514
Males	89,997
Females	90,517
Sex ratio (/100 females)	99.4
Urban	51,975
Rural	128,539
Per cent urban	28.8
Population in year 2000 (000)	208,329
Functional age groups (%)	
Young child: 0-4	11.6
Child: 5-14	23.4
Youth: 15-24	21.3
Elderly: 60+	6.3
65+	3.9
Women: 15-49	26.0
Median age (years)	21.8
Dependency ratios: total	63.7
(/100) Aged 0-14	57.4
Aged 65+	6.3
Agricultural population density (/hectare of arable land)	3.89
Population density (/sq. km.)	95
Average annual change (000)	
Population increase	2,860
Births	4,759
Deaths	1,899
Net migration	0
Annual population total (% growth)	1.52
urban	3.96
rural	0.45
Crude birth rate (/1000)	25.4
Crude death rate (/1000)	10.1
Net migration rate (/1000)	0.0
Total fertility rate (/woman)	2.90
Gross reproduction rate (/woman)	1.42
Net reproduction rate (/woman)	1.18
Infant mortality rate (/1000)	74
Life expectancy at birth (years)	
Males	57.1
Females	59.9
Both sexes	58.5
GNP per capita (U.S. dollars, 1987)	450

Sources: Population density on arable land is derived from two publications issued by the Food and Agriculture Organization of the United Nations: FAO Production Yearbook 1985 and World-wide Estimates and Projections of Agricultural and Non-Agricultural Population Segments 1950-2025, ESS/MIS/86/2; gross national production per capita: World Bank, World Development Report 1989. Figures for population, total population by sex, population by age group, age indicators, urban-rural population, and population density (/sq. km.) refer to the year 1990; figures for average annual change, rate of annual change, and fertility and mortality are the five-year averages for 1990-1995. These data are from the Population Division, Department of International Economic and Social Affairs of the United Nations, World population prospects: 1988.

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I. SUMMARY

1. UNFPA proposes to support a population programme in the amount of $25 million, of which $22 million is to be committed from UNFPA's regular resources, over a four-year period, starting January 1991, to assist the Government of Indonesia, a priority country for UNFPA assistance, in achieving its population and development objectives. If UNFPA's funding situation permits, the balance of up to $3 million may be provided by UNFPA. If and to the extent this is not possible, UNFPA would seek to cover the shortfall from other sources, including multi-bilateral sources. This would be the fourth cycle of UNFPA assistance to Indonesia. The third country programme, which began in 1986, will come to an end in 1990.

2. The fourth country programme is based on the recommendations of a multi-sectoral evaluation review mission that visited Indonesia in November 1988. It would be closely linked to the Government's Fifth Five-Year Development Plan, REPELITA V (1989/1990-1993/1994). The broad objectives of the programme would be to reduce the annual population growth rate; to strengthen the norm of a "small, happy and prosperous family"; to support a harmonious balance between population and natural resources and thereby help preserve the environment; to enhance the status and well-being of women; and to contribute to the Government's efforts to accelerate sectoral and regional development.

3. The programme would consist of projects executed directly by the Government which are designed to improve the quality of family planning and related services in four selected provinces of the Outer Islands, as well as in the organized sector and in poor urban and rural areas throughout the country. The programme would also aim at improving the management and implementation of such services; supporting biomedical research to improve the safety and effectiveness of contraceptive techniques; supporting social and demographic research required for the formulation of sound population policies; strengthening the research and training capabilities of four selected Population Studies Centres (and their affiliated Women's Studies Units) at regional universities in the Outer Islands; providing training for regional planners in population and related issues; supporting activities instrumental in the development of an effective national vital registration system; and enhancing the capabilities of the Central Bureau of Statistics.

4. All projects under the proposed programme, as in all UNFPA-assisted programmes, would be undertaken in accordance with the principles and objectives of the World Population Plan of Action; that is, that population policies should be consistent with internationally and nationally recognized human rights of individual freedom, justice and the survival of national, regional and minority groups (para. 14 (d)); that respect for human life is basic to all human societies (para. 14 (e)); and that all couples and individuals have the basic right to decide freely and responsibly the number

and spacing of their children and to have the information, education and means to do so (para. 14 (f)).

II. BACKGROUND

5. Indonesia is the world's largest system of archipelagos, stretching more than one eighth of the entire length of the equator and consisting of over 13,000 islands, more than 900 of which are inhabited. The country's population -- estimated at 180 million in 1990 -- is the fifth largest in the world. Indonesia's mortality and fertility rates have declined significantly in the past 20 years, though they are still among the highest in the region. Since 1969 the crude birth rate has fallen from 44 per 1,000 to 28 per 1,000 and the total fertility rate from 5.6 to 3.3 children per woman, according to government estimates.* According to the 1985 Intercensal Survey (SUPAS 85), for the first time the 0-4 age group was smaller than the 5-9 age group. Even so, the rate of natural increase is fairly high, and population growth threatens to impede Indonesia's social and economic development. Another serious problem is the uneven distribution of population throughout the archipelago, with population densities ranging from over 750 people per square kilometre in Java (where more than 60 per cent of the Indonesian people live on less than 7 per cent of the country's land) to less than 5 persons per square kilometre in Irian Jaya.

6. The New Order Government, which came into power in 1966, has always given an important role to population policy in development planning, placing emphasis on reducing the population growth rate, lowering mortality and fertility rates, and creating a more balanced distribution of population. The key instruments of this policy are the national family planning programme, related health and nutrition services, and the transmigration programme. The Government established the National Family Planning Co-ordinating Board (BKKBN) as the lead implementing and co-ordinating agency in this area during the first five-year development plan, REPELITA I (1969/1970-1973/1974). Subsequent development plans all tied population objectives to national development goals and set explicit population objectives. During the fourth five-year development plan, REPELITA IV (1984/1985 - 1988/1989), attempts were made to decentralize the programme and make it less dependent on government funding by encouraging more community and private sector participation. Greater concern was shown for overall quality of life as well as for women's issues, with income-generating, vocational training and literacy programmes becoming more integrated into the mainstream of the family planning programme.

7. The current five-year plan, REPELITA V (1989/1990-1993/1994) aims at reducing Indonesia's population and emphasizing the development of human resources. REPELITA V targets for 1994 include: (a) a decrease in the

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* Government estimates of demographic indicators may differ from the United Nations projections provided in the demographic facts sheet on page two of this report.

country's growth rate from 2.1 per cent to 1.9 per cent; (b) a decrease in the total fertility rate from 3.3 to 3 children per women; and (c) an increase in life expectancy from 63 to 65 years. The plan also aims by 1993/1994 to have 4.5 million new family planning acceptors (up from 4.4 million in 1989/1990); a contraceptive prevalence rate of 52 per cent (up from 49 per cent in 1989/1990); and a total of 17.6 million continuing users (up from 15.0 million in 1989/1990).

8. Despite having one of the most successful national family planning programmes in the world, BKKBN faces new challenges as it strives to maintain programme momentum. Because of the high birth rates of the early 1970s, large new cohorts of women are moving into their reproductive years. Increasing numbers of new acceptors (4.4 million per year) will have to be recruited and continuing acceptors maintained just to keep contraceptive prevalence at current rates and prevent escalation in birth rates.

9. The transmigration programme aims at achieving a more balanced distribution of population by resettling families from densely-populated areas to sparsely-populated areas. It also aims at supporting regional development, creating employment opportunities, improving the standard of living of participants, and strengthening national unity and stability. Although the programme has encountered many difficulties in the past, well over 1 million families have been resettled during the last two development plans. REPELITA V calls for the resettling of 550,000 more families from Java, Bali and Lombok to Sumatra, Kalimantan, Sulawesi, Irian Jaya, and other islands.

10. The Government recognizes that to support sustainable development natural resources must be exploited in a rational manner, with due consideration given to protecting the environment and the needs of future generations. An Environmental Management Act was passed in 1982, and an environmental impact assessment has been mandatory for major development projects since 1987, although to date it has been practically impossible to implement or enforce these regulations because the necessary legal mechanisms and trained personnel are not yet in place. REPELITA V proposes a number of action programmes aimed at better resource management and at protecting the environment. The State Ministry for Population and Environment, created in early 1983, plays an important role in formulating relevant policy and in co-ordinating population and environmental activities.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

11. The third country programme of UNFPA assistance to Indonesia was approved by the Governing Council in June 1985 in the amount of US $18 million for a five-year period (1986-1990). On the whole, according to a 1988 UNFPA evaluation mission, UNFPA assistance has been used very efficiently, in particular in strengthening the country's capacity to formulate and implement population and related activities. The programme's effectiveness has stemmed

from various sources: the strong commitment at all levels of the Government; an appreciation of the role of population issues in the development process; the presence of a strong infrastructure to facilitate implementation; the high absorptive capacity of most projects; the improved monitoring of project activities by UNFPA's Jakarta office; the active participation of the population; the legitimating and active support from religious and social leaders; and the stability of the programme's leadership. Those factors that may have constrained programme implementation include: a lack of timely recruitment of national consultants; inconsistent estimates of contraceptive prevalence rates; an unanticipated shortage of research support staff in some projects; insufficient attention to quality assurance among service providers; incomplete collection and analysis of baseline data; and insufficient consideration of gender issues in most projects.

Maternal and child health and family planning

12. UNFPA activities in this sector focused primarily on assisting the Government in expanding and strengthening family planning services in the provinces of the Outer Islands and in the organized sector of five selected urban areas; strengthening biomedical and operations research capabilities; strengthening the management capabilities of BKKBN; and improving IEC activities at the central and provincial levels.

13. UNFPA supported BKKBN's efforts to extend family planning services to 10 million underserved inhabitants in 11 provinces in the Outer Islands, with the primary objective of reaching 30 per cent of potential acceptors. Training was provided to doctors and paramedics in tubectomy and vasectomy, as well as in NORPLANT insertion and removal. UNFPA assistance was also used to provide surgical equipment, such as laparoscopes and minilap kits, and to purchase vehicles for the mobile units providing clinical services in these areas.

14. In the organized sector, UNFPA supported an intensive programme to motivate workers, their families and members of the local community to use family planning services. The programme, which was extended through some 1,200 industrial enterprises in the country's five most industrialized provinces, exceeded its target of reaching 1.2 million workers. UNFPA assistance was also used to train medical and paramedical staff working in plant health clinics.

15. Two projects focused on enhancing the country's research and management capabilities in the area of MCH/FP. One supported the development of an organized research system which would enable BKKBN to make informed decisions on ways to improve the quality and outreach of family planning services, in particular in areas with low contraceptive prevalence rates; to design new programmes for youth; and to improve service statistics. Under the project, approximately 20 small-scale studies were conducted, as was the 1987 Contraceptive Prevalence Survey, which was jointly financed with the United

States Agency for International Development (USAID). The project also provided fellowships for BKKBN staff to study epidemiology, applied statistics, research methodology, and management. The other project aimed at strengthening the management capabilities of BKKBN through the adoption of a total management system (TMS). Under the project, a draft plan was prepared which includes a description of 12 sub-systems and 54 guidelines. A description of the future national family planning programme, to be finalized in 1993, was begun as well.

16. A fifth project sought to improve the research capability in human reproduction of 11 universities and the Human Reproduction Research Centre of BKKBN through training in such areas as epidemiology and statistics.

Information, education and communication

17. The master IEC plan developed earlier is being adapted to the needs of the provinces in keeping with the policy of decentralization. Family planning messages have been tailored to the specific needs of particular groups and subregions and have been linked to pertinent aspects of social and economic welfare. UNFPA resources have complemented those of other donor agencies such as the World Bank. UNFPA's contribution has included short-term training abroad in programme planning and evaluation, video production, study tours, and materials production. Population education was introduced into the curriculum of four private educational institutions in selected provinces. Activities, which have been implemented in three phases, included training of master trainers, revision of curriculum, and starting in 1988, actual teaching of population education to students.

Population dynamics

18. Five projects in this category were aimed at helping the Government strengthen institutions involved with population policy formulation and policy-related research. The activities of one of the projects included the design of a master training plan involving Indonesia's three main universities and 15 regional universities. Staff of the State Ministry of Population and Environment were trained in population and related issues through short-term fellowships, and workshops and seminars were organized to discuss population policy issues and research priorities and to help finalize proposed changes in population policies to be included in REPELITA V.

19. A research training capabilities project carried out by the Demographic University of Indonesia aimed at strengthening the analytical skills of planners and policy-makers, carrying out an applied research agenda, and disseminating research findings through publication of the country's only demographic journal and newsletter. The training programme, which has been very successful, has reached over 400 people. Studies have been conducted on

measuring quality of population, determining the characteristics of female migrants relocating to Jakarta, and evaluating the transmigration programme since REPELITA I.

20. Another project aimed at strengthening the research and training capabilities of the Population Studies Centre of Gadjah Mada University, which until recently was the only institution offering a Master's degree programme in population studies. UNFPA assistance has enabled six participants from provincial universities to receive advanced training in population studies each year. Workshops for regional staff have been held every year in such areas as micro-computer training, population analysis and research methodologies. A similar project, aimed at strengthening the research capacity of the Population and Manpower Studies Centre of the Indonesian Institute for Sciences, provided support for a research programme on population mobility as well as on population distribution and various other issues affecting Indonesia's labour force. A fifth project dealt with the decentralization of research, a highly desirable development in a country like Indonesia with its vast territory, diversified cultures, and need for regional-level data. The UNFPA project, which focused on five population studies centres, was implemented along with a number of related activities funded by other donors. The project provided assistance for training at universities abroad and in Indonesia, the expansion of library facilities and equipment, and travel abroad to international meetings and short-term training courses.

Women, population and development

21. In 1978, BKKBN, with assistance from UNFPA, initiated an innovative pilot project directed at women's family planning acceptor groups in just over 100 villages. The project combined an integrated package of education, training, skills development, and appropriate technology with access to credit. So effective was the approach pioneered by BKKBN that numerous government, non-governmental and international agencies have followed suit, encouraging the use of similar integrated community development approaches in other areas. BKKBN estimates that at the present time some 12,000 women's income-generating groups are in operation in 5,000 villages.

22. A second project was designed to extend these activities to communities in other areas. Training in management, a major activity of the project, has been provided to 120 leaders of women's groups. Training in family planning motivation has also been provided to NGOs in villages, and provision has been made for revolving loans and technical assistance to 500 women's groups. UNFPA assistance also helped support some 30 studies conducted by provincial universities on such topics as marketing and enterprise management.

23. The 1988 evaluation mission reported that the family planning co-operative income-generating scheme that evolved from these project activities

contributed to the increasing acceptance and continued use of contraceptives as well as to the shift to more reliable contraceptive methods, mainly the intrauterine device (IUD). The projects also assisted women and their families in expanding their income-generating activities, improving their standard of living as a result. Perhaps even more important, the project fostered self-reliance, as evidenced by the continuation of income-producing activities even after initial capital outlays had been used up.

Multi-sectoral activities

24. Family life education and counselling services for youth. According to the adjusted figures of the 1980 census, 42 per cent of Indonesia's population was below 15 years of age (see the data sheet on p. 2 for the United Nations projection for 1990). It was necessary, therefore, to develop innovative and effective approaches to reach youth, in both urban and rural areas. Project activities have included counselling by peer groups using telephone hotlines, in-centre counselling by professionals, family life education courses, and materials support.

Other external assistance

25. External assistance in support of population and related activities in Indonesia has been extensive. The World Bank has provided assistance in the form of a $41.4 million loan in support of the Government's population policy and overall fertility reduction goals during REPELITA IV. The total cost of the project is $94.4 million. The United Nations Centre for Human Settlements (HABITAT) has supported projects to assist the Government in formulating a strategy for urban development, addressing such issues as population migration, and the World Health Organization (WHO) has supported research on various aspects of fertility, including the behavioural and social determinants of fertility regulation. On the regional level, the Asian Development Bank financed, in co-operation with the Government, the Health and Population Project (1986-1990), aimed at improving the delivery of health care services in Indonesia.

26. On a bilateral basis, USAID has assisted the country in increasing contraceptive prevalence and in providing a full range of family planning services. The Federal Republic of Germany has participated in the family planning aspects of a technical co-operation project for regional development.

27. Many non-governmental organizations (NGOs) have been involved in giving assistance to different types of population-related activities in Indonesia. Among the most active have been Family Planning International Assistance, The Ford Foundation, the International Planned Parenthood Federation (through its local affiliate, the Indonesian Planned Parenthood Association), the International Science and Technology Institute, Inc., and The Pathfinder Fund.

IV. PROPOSED PROGRAMME 1990-1994

28. The fourth country programme is based on the findings and recommendations of the country programme evaluation mission conducted in November 1988 and on the priorities of REPELITA V. The broad objectives of the proposed programme are stated in Section I of this report. The immediate objectives would be: (a) to upgrade and expand family planning services in areas with low contraceptive prevalence rates and among underserved groups in poor rural and urban areas; (b) to improve the quality and management of family planning services at the central and community levels; (c) to strengthen the capability of and enhance opportunities for youth to participate in family planning and development activities; (d) to encourage self-sufficiency in family planning; (e) to design innovative channels of communication and motivational materials to reach specific target groups; and (f) to strengthen advocacy for and mobilization of women in social and development activities.

29. The strategy proposed to attain these objectives would focus on enhancing the status of the national family planning programme at all levels; developing and conducting operations research responsive to management needs, especially in the provinces; upgrading the family planning programme in four selected provinces with low prevalence rates, as well as in poor urban and rural areas; institutionalizing activities designed to provide women with a major role in development; and reinforcing the involvement of youth in the national family planning programme. The proposed programme would also concentrate on improving the quality of IEC services and developing new IEC strategies for special groups; conducting biomedical research to ensure reliable and safe contraception; assisting the Government in establishing effective institutional structures and procedures for collecting and processing accurate and reliable population data and for conducting quality population policy-oriented research; strengthening the integration of population concerns within development planning; and consolidating data, research and policy development on the links between unbalanced population growth and distribution as well as on the effects of these two factors on environmental degradation. All activities of the proposed programme would be executed by government agencies.

Maternal and child health and family planning

30. UNFPA proposes to provide $14.2 million to assist five projects in order to improve family planning services in four selected Outer Island provinces, in low-income urban areas, and in the organized sector; to strengthen the management, operations research and evaluation capability of BKKBN; and to strengthen the capability of BKKBN in biomedical research and training. The projects would be designed to coincide with some of the main components of the strategy of the national population programme, including: (a) the promotion of more reliable, long-term contraceptive methods such as the IUD, injectables, and implants by expanding and upgrading existing facilities, training medical and paramedical staff, basing IEC campaigns on active

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community participation, and supporting community leaders; and (b) expansion of programme coverage to the entire population, including those in remote and transmigration areas.

31. Expanding and strengthening family planning and other related services in four Outer Islands provinces. This project, accounting for approximately a third of the assistance to this sector, would focus on upgrading services in the Outer Island provinces with low contraceptive prevalence rates. The broad objective of the project would be to increase contraceptive awareness and practice to as high as 80 to 90 per cent of the national average in the provinces. Activities would include: (a) expansion of contraceptive services by upgrading service delivery points through the provision of equipment and contraceptive supplies, training of doctors and nurses/midwives in contraceptive methods, training of family planning field workers, volunteers, and supervisors in family planning counselling and the provision of vehicles for mobile teams; (b) provision of IEC support services aimed at specific target groups through seminars and workshops for influential people among these target groups, as well as for village motivators, provincial mass media managers and religious leaders; (c) production and distribution of IEC materials tailored to these specific target groups; and (d) introduction of strategies to enhance the status of women including an integrated MCH/FP and income-generating package to be introduced to some 1,000 women's groups. The project would also provide training in MCH/FP to 25 family planning co-ordinators, 250 cadres and numerous traditional birth attendants (TBAs), as well as enhance the participation of youth.

32. Strengthening management capabilities of the BKKBN. The objective of this project would be to develop and refine a long-term strategy to improve the management of human resources; to improve the management within each of the 12 sub-systems of the management system; to complete the newly developed total management system and implement it throughout the entire BKKBN apparatus; to complete (by 1993) the description being prepared of the national family planning programme and distribute it to all relevant sectors of the Government; and to strengthen the legal status of family planning. UNFPA assistance would be used to upgrade 12 management sub-systems and develop relevant manuals and documents, as well as to provide training for lower and middle management at BKKBN headquarters and in the provinces.

33. Strengthening the operations research capability in family planning. The objectives of this project would be: (a) to work closely with management to identify topics particularly related to the situation in the provinces, in accordance with the priorities of REPELITA V; (b) to strengthen the research capability within BKKBN and within relevant local organizations; and (c) to develop provincial sub-centres for operations research. Moreover, the project would identify, define and annually prioritize key areas for such research in six selected provinces. UNFPA proposes to provide assistance for the following activities: (a) the training of four people from each of six

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provinces in a three-part workshop covering the development of proposals and the design and evaluation of interventions; (b) the conduct and monitoring of six major research projects each year; (c) the conduct of three annual workshops on the implementation of operations research; and (d) the organization of two national seminars each year to disseminate results of the various research projects and review their policy implications. UNFPA assistance would also be used to send managers and researchers to relevant international seminars; to provide research equipment to sub-centres; and to produce and distribute research reports. An international consultant would be required for three months during each of the programme's first two years to help with planning, training and the conduct of a performance review.

34. Expanding family planning services to the organized sector. This project would employ a two-pronged approach. The first would seek to extend the approach used in the earlier project to 600 plants in seven provinces with the objective of increasing contraceptive prevalence by 20 per cent among workers. Activities would include knowledge-attitude-practice (KAP) surveys, baseline surveys of clinical availability and needs, training courses for managers, IEC courses for leaders among the workers, and refresher and advanced courses for clinical personnel. The second, newer approach would be to use NGOs to develop a service delivery system designed to increase awareness and contraceptive usage of employees of plantations and small-scale industries. A baseline survey would be undertaken to identify appropriate small-scale industries and to create a profile of target groups. UNFPA support would be used to help identify areas in which to set up new clinics, as well as to equip them and train medical and paramedical personnel to run them. A third component of the project would be the further strengthening of population education within the curriculum of 150 vocational institutes and of the staff training centre of the Ministry of Manpower. Efforts would also be made to enact a new law to make investments in activities designed to promote family planning among employees tax exempt.

35. Expanding family planning services to the urban poor. It is estimated that over 3 million of Jakarta's 8 million residents live in slums and are either unemployed or have no fixed means of earning an income. Contraceptive use in these groups is lower than that in any other group. The objective of this project would be to increase contraceptive prevalence by 30 per cent in five selected areas. Strategies for achieving this objective would include using NGOs as motivators and providers of services, encouraging professional organizations to become more involved with the urban poor, and expanding income-generating activities among the urban poor. The project would be implemented in 10 urban locations in the Greater Jakarta area, Bandung, Semarang, Surabaya, and Medan. UNFPA assistance would cover the costs of assessment of needs, training in family planning motivation, equipment to upgrade clinics, and IEC materials.

36. Strengthening biomedical and human medical reproduction research in family planning. The evaluation mission recommended a further strengthening of biomedical research institutions through well-designed and monitored training and research activities. The immediate objectives of this project would be: (a) to develop a staff at BKKBN headquarters and provincial levels and at each of the collaborating institutions capable of planning, co-ordinating, conducting, and evaluating biomedical research on fertility regulation; (b) to develop reference laboratories at Gadjah Mada and Padjadjaran Universities; (c) to develop national capabilities in conducting epidemiological studies and in monitoring contraceptive use; (d) to conduct research on safety, efficiency and acceptance of contraceptive use; and (e) to establish a fully functioning data management unit at BKKBN. UNFPA would provide support for training grants for scientists, research projects, research seminars and workshops, upgrading of library and laboratory facilities, and short-term international consultancy services.

Information, education and communication

37. The primary objective of the activities in this sector would be to encourage a change in the attitude, understanding and practice of the public towards family planning. A three-pronged approach would be used: (a) securing the involvement of community leaders through orientations and seminars; (b) promoting individual and group discussion among women of reproductive age highlighting the benefits of family planning; and (c) decentralizing IEC activities to the provincial level. The primary objective would be to reorient the IEC approach to cope with the demands and challenges of future programmes and to further decentralize IEC activities in accordance with BKKBN's plans. This would require making modifications in the current strategy in terms of target audiences, messages and channels of communication. UNFPA proposes assistance in the amount of $1.6 million to cover the costs of conducting audience research and workshops to help develop strategies for specific audiences and of developing and pre-testing IEC prototype software. As in the past, assistance would be sought from other donors for the production and distribution of software, slides and printed materials. UNFPA would also support training workshops specially geared to upgrading skills in communication and counselling, as well as improving planning, production, monitoring and evaluation of IEC materials and services. Five Media Production Centres would be selected to provide training in media production and to maintain and repair equipment.

Population dynamics

38. UNFPA assistance to this sector, in the amount of $5 million, would concentrate on enhancing the research and planning capability of the country. Therefore, UNFPA proposes to continue to support four regional Population Studies Centres, which have demonstrated a capability for conducting high-quality research as well as a strong commitment to the long-term development

of the country. UNFPA also proposes to support policy-oriented research studies that examine population and the development of resources within the context of environmental concerns, as well as those that focus on the role of women in development. UNFPA assistance would be used, moreover, to analyze data already collected as well as 1990 census data. Other activities would include the training of the staffs of regional and provincial planning boards in relevant aspects of population dynamics so that they can more effectively integrate population concerns into regional development planning. The design and implementation of these programme activities would be closely co-ordinated with UNDP-assisted activities relating to regional planning.

39. Strengthening regional Population Studies Centres. This project, accounting for roughly half of the assistance to this sector, would support training and research relevant to the needs of regional development planners. Each centre, attached to a regional university, would offer at least two two-week training courses a year, specially designed to meet the specific training needs of personnel from government agencies involved in regional development. One or two of the training courses over the four years of the project would focus on women's issues, utilizing the resources of the Women's Studies Units at the centres. UNFPA assistance would support fellowships for in-country master's degree programmes and short specialized courses, travel to international conferences, consultancy services, and some library and data-processing equipment. The project would be implemented by the universities themselves with the State Ministry of Population and Environment assuming the responsibility for overseeing and co-ordinating the projects.

40. The integration of population policy into regional development planning. This project is designed to strengthen the integration of population policies within regional development planning through research and the training of regional and provincial development planning boards. Activities would cover all 27 provinces and include a training needs assessment study, training and materials development. A training course emphasizing the linkages between population and development and the implications of such linkages for policy formation is planned for senior staff of regional and provincial planning boards. Technical training would be provided to junior- and middle-level staff as well. The project would be implemented by the National Development Planning Agency.

41. Strengthening Central Bureau of Statistics (CBS) capabilities. This project would provide specialized training to the Bureau's staff, especially in CBS offices in the provinces, in order to facilitate the analysis of the 1990 census, improve the quality of routine surveys conducted by the Bureau and maximize the utilization of census and population data. A comprehensive vital registration system is expected to be fully operational throughout the country only after 1997. Therefore, censuses and surveys conducted by CBS will continue to be the main source of population data used by the Government for planning purposes. Three types of training would be offered: (a) in-

country training for 120 staff members in management, statistics, demographic analysis, and survey and sampling methods; (b) overseas training for selected staff in specialized six-month courses; and (c) two workshops designed to familiarize data users with population census procedures and results. UNFPA would also provide non-expendable equipment and computer software, as well as short-term international consultancies to advise on the curriculum for the in-country training conducted at CBS and on the preparation of the workshops. The design and implementation of these activities would be co-ordinated with the efforts of UNDP/ILO in their joint programme to strengthen the management information system of the Ministry of Labour, as well as with UNDP support for the 1990 census.

42. Strengthening population policy-related research. This project is designed to strengthen the capabilities of the State Ministry of Population and Environment to co-ordinate research efforts to provide data and analysis needed for population policy formulation and implementation. Under the project, a steering committee would be formed within the Ministry and would include representatives of relevant government agencies. The steering committee would prepare a research agenda, establishing priorities that are likely to include such areas as fertility and mortality decline, women in development, and integration of population and environmental concerns. An early analysis of the 1990 census data would be undertaken. Support would continue to be provided for the journal and newsletter of the Indonesian Demographers Association. The project would be implemented by the State Ministry of Population and Environment.

43. Developing a vital registration system. At present there are four ministries involved in various aspects of population registration. However, their activities are not co-ordinated. The State Ministry of Population and Environment has been given a mandate to implement a complete population registration system in the country by 1997. This project would assist the Government in establishing and putting into operation a vital registration system in six districts in west and central Java, which would be gradually extended in and outside of Java. UNFPA has been requested to provide assistance to train some 1,000 village registration officials, 200 sub-district registration officials and 30 trainers. The Fund has also been asked to provide support for a computerized population registration system in six sample districts, including provision of computers, development of software and training of personnel. National and international consultants would be provided to assist in the design of the training, the conduct of the awareness creation campaign and the analysis of data. The project would be implemented by the State Ministry of Population and Environment.

44. Population and environment. This project would seek to develop a system of monitoring population and environment dynamics within the context of socio-economic development, which in turn could be used to help develop policies and programmes aimed at achieving sustainable development. The monitoring

procedures developed would be tested in three different settings: in the sparsely populated scattered islands of Eastern Indonesia, where transportation is difficult and fishing is the main economic activity; in the more densely population area of south Sumatra, with settled land patterns and a wide range of economic activities; and in Yogyakarta, with long established and dense agricultural settlements, high urban development and past deforestation. Each of these areas has both a Population Studies Centre and an Environment Centre capable of conducting research and providing training. UNFPA assistance would cover international and national consultancies, training, research and seminars.

Women, population and development

45. UNFPA has been a pioneer in developing strategies to improve women's socio-economic status. The Fund's activities in Indonesia in this area began as early as 1979 when it worked closely with BKKBN in creating an income-generating activities scheme. UNFPA would continue to assist the Government in further strengthening its advocacy and social mobilization efforts to enhance the participation of women in development activities. Key participants of this programme would be the State Ministry for the Role of Women (SMRW) and BKKBN.

46. UNFPA proposes to provide $2 million to support two projects in this area. The first, accounting for approximately three quarters of the assistance to this sector, would be aimed at enabling women to play a major role in population and development programmes. The objectives of this project would be: (a) to consolidate and enhance the institutionalization of strategies to expand the roles of women in development in areas currently benefiting from integrated income-generating activities; (b) to assist special target groups such as school dropouts, particularly those migrating to urban areas; and (c) to enhance BKKBN's capabilities to advocate and plan activities for women in population and development at the macro-level. There would three sub-projects under this umbrella project. They include: (a) a comparative analysis of various stages of operation of the income-generating scheme; (b) a programme for female school drop-outs integrating income-generating activities with training in MCH/FP and safe motherhood concepts and with training to develop vocational skills; and (c) enhancement of BKKBN's advocacy role and macro-planning capability in relation to women in population and development.

47. The second project would seek to strengthen the women and development programme network at provincial sub-regional levels. The SMRW, which was established in 1978, has performed an advocacy role in sectoral programmes and has co-ordinated activities among line agencies, NGOs, provincial governments, and educational institutions. It needs to strengthen its database system for national policy and programmes and sectoral planning, improve its technical capabilities for programme and project development, and improve its monitoring

system. UNFPA assistance would complement that of other donors, notably UNICEF, UNDP and the Canadian International Development Agency (CIDA). The objectives of the UNFPA-funded project would be: (a) to develop a methodology for sectoral needs analysis at provincial and sub-regional levels; (b) to develop a training methodology to enhance key provincial programme implementors in selected provinces for programme and project development and project monitoring; and (c) to improve the perspectives and skills of provincial personnel in addressing women's needs in areas where women are most disadvantaged. Activities would include a situation analysis of specific community groups, development of case studies from a given sector or community; development of training modules; and training of personnel from line agencies and NGOs. UNFPA would also support the services of one international consultant.

Special programmes

48. Direct youth participation in family planning. UNFPA has been supporting Indonesia's efforts to integrate population and family planning education into youth programmes, through the Boy Scouts and other youth organizations. Periodic assessment studies have shown positive results. Actual direct youth participation in family planning programmes, however, is far below the expected level. The Government has planned a two-pronged approach; namely, to expand the ongoing youth programmes to other provinces and to initiate pilot projects in two selected provinces to help develop new strategies and innovative means to ensure more active and direct participation of youth in family planning programmes.

49. UNFPA proposes to allocate $1.2 million to this central-level project which would provide support to the youth component of the family planning projects proposed for four provinces in the Outer Islands (see para. 31). It would also support pilot projects in two other selected provinces. The pilot activities would focus on the management of skills development activities and family planning programmes and would cover operations research on patterns of youth participation and motivation, on cost-effective training and on inter-sectoral collaboration. The project would also include a needs assessment survey of the area and a profile of target audiences, as well as intercountry study visits for 15 key personnel to observe strategies of youth participation in family planning activities and income-generating programmes in three selected countries. Other activities would include: orientation seminars for 50 key personnel from the six provinces examining the objectives, strategies, scope, and sequence of project activities; interprovincial study visits for 60 managers and middle-level managers to observe new developments; periodic review, supervision and guidance of youth programmes in the six provinces; and provision of audio-visual equipment.

Programme reserve

50. An amount of $1 million, half of which is to be sought from other sources, would be held in reserve for new proposals that may be developed within the framework of the proposed programme.

Programme co-ordination

51. The programming process of UNFPA has been planned to allow full co-ordination with all United Nations agencies and bilateral donors. UNFPA projects would complement the activities of the World Food Programme (WFP) and UNDP in transmigration and in fishing communities. In the areas of safe motherhood and integrated health services at the grass-roots level, UNFPA activities would be co-ordinated with UNICEF assistance. In planning support to the regional population studies centres and integration of population in development planning at the provincial level, UNDP assistance has been taken into consideration. Likewise, the project to assist the Central Bureau of Statistics for the 1990 census would be closely linked to the UNDP/ILO project to strengthen the statistical and analytical function of the Ministry of Manpower and CBS. UNFPA assistance would also take into account USAID's programme focusing on the private, NGO sector.

Programme monitoring, evaluation and management

52. BKKBN is responsible for the overall implementation and monitoring of projects related to family planning activities. The respective ministries responsible for the implementation of individual projects have been noted in the pertinent sections above.

53. The programme would be monitored in accordance with standard procedures as outlined in the UNFPA guidelines on monitoring and evaluation of UNFPA-supported projects and programmes. The UNFPA office in Indonesia has developed an efficient computerized system for monitoring individual projects. As recommended by the evaluation mission, an attempt would be made to develop a similar system for entire sectors, with the aim of providing a good basis for fostering linkages and co-ordination between projects and sectors.

54. At the field level, the programme would be managed by the UNFPA Country Director under the overall supervision of the UNFPA Representative who is also the Resident Representative of UNDP. The UNFPA Country Director would be assisted by two national programme officers, one programme assistant and a secretary.

Financial summary

55. As indicated in paragraph 1, UNFPA would provide assistance in the amount of $25 million, of which $22 million would be committed from UNFPA regular

resources. If UNFPA's funding situation permits, the balance of up to $3 million may be provided by UNFPA. If and to the extent this is not possible, UNFPA would seek to cover the shortfall from other sources, including multi-bilateral sources. The table below shows how the programme would accommodate the two levels of funding:

	UNFPA regular resources	Other resources	Total
	$	$	$
Maternal and child health and family planning	12,200,000	2,000,000	14,200,000
Information, education and communication	1,600,000		1,600,000
Population dynamics	4,500,000	500,000	5,000,000
Women, population and development	2,000,000		2,000,000
Special programmes	1,200,000		1,200,000
Programme reserve	500,000	500,000	1,000,000
TOTAL	22,000,000	3,000,000	25,000,000

V. RECOMMENDATION

56. The Executive Director recommends that the Governing Council:

(a) Approve the programme for Indonesia in the amount of $25 million for the four-year period 1990-1994;

(b) Authorize the Executive Director to commit an amount of $22 million from UNFPA's regular resources;

(c) Further authorize the Executive Director to provide the balance of up to $3 million from UNFPA's regular resources, if such resources are available. If and to the extent they are not, further authorize the Executive Director to seek to cover the shortfall from other sources, including multi-bilateral sources;

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(d) Authorize the Executive Director to allocate the funds and make appropriate arrangements with the Government of Indonesia and with the executing agencies.

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UNITED NATIONS POPULATION FUND

PROPOSED PROGRAMMES AND PROJECTS

Recommendation by the Executive Director
Assistance to the Government of the Syrian Arab Republic
Support for a comprehensive population programme

Proposed UNFPA assistance:	$10 million
Estimated value of Government's contribution:	To be determined
Duration:	Five years
Estimated starting date:	January 1990
Executing agencies:	Government of the Syrian Arab Republic United Nations International Labour Organisation (ILO) Food and Agriculture Organization of the United Nations (FAO) United Nations Educational, Scientific, and Cultural Organization (UNESCO) World Health Organization (WHO) United Nations Population Fund (UNFPA)
Government co-ordinating agency:	State Planning Commission

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90-05579

SYRIAN ARAB REPUBLIC

Demographic facts

Population Total (000)	
Total	12,501
Males	6,325
Females	6,176
Sex ratio (/100 females)	102.4
Urban	6,479
Rural	6,022
Per cent urban	51.8
Population in year 2000 (000)	17,611
Functional age groups (%)	
Young child: 0-4	19.1
Child: 5-14	29.0
Youth: 15-24	19.3
Elderly: 60+	4.2
65+	2.6
Women: 15-49	21.4
Median age (years)	15.9
Dependency ratios: total	102.8
(/100) Aged 0-14	97.5
Aged 65+	5.3
Agricultural population density (/hectare of arable land)	0.51
Population density (/sq.km.)	68
Average annual change (000)	
Population increase	481
Births	571
Deaths	79
Net migration	-11
Annual population total (% growth)	3.52
urban	4.53
rural	2.37
Crude birth rate (/1000)	41.7
Crude death rate (/1000)	5.7
Net migration rate (/1000)	-0.9
Total fertility rate (/woman)	6.25
Gross reproduction rate (/woman)	3.05
Net reproduction rate (/woman)	2.83
Infant mortality rate (/1000)	39
Life expectancy at birth (years)	
Males	65.2
Females	69.2
Both sexes	67.2
GNP per capita (U.S. dollars, 1987)	1,640

Sources: Population density on arable land is derived from two publications issued by the Food and Agriculture Organization of the United Nations: FAO Production Yearbook 1985 and World-wide Estimates and Projections of Agricultural and Non-Agricultural Population Segments 1950-2025, ESS/MIS/86/2; gross national production per capita: World Bank, World Development Report 1989. Figures for population, total population by sex, population by age group, age indicators, urban-rural population, and population density (/sq. km.) refer to the year 1990; figures for average annual change, rate of annual change, and fertility and mortality are the five-year averages for 1990-1995. These data are from the Population Division, Department of International Economic and Social Affairs of the United Nations, World population prospects: 1988.

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I. SUMMARY

1. The United Nations Population Fund (UNFPA) proposes to support a comprehensive programme in the amount of $10 million over a five-year period, starting January 1990, to assist the Government of the Syrian Arab Republic in achieving its population and development objectives. The proposed country programme, UNFPA's fourth cycle of assistance to the country, is based on the findings and recommendations of a multi-sectoral Programme Review and Strategy Development (PRSD) Mission which visited the Syrian Arab Republic from 16 September to 14 October 1989. It would coincide with the Government's seventh five-year national plan (1991-1995), which, among other things, aims at integrating population factors into socio-economic development planning.

2. The programme would supplement and complement the Government's programme aimed at increasing the knowledge of the interaction between demographic and socio-economic factors and at enhancing the country's institutional capacity for developing a comprehensive population policy. The main goals of the UNFPA programme would be: (a) to assist in the formulation of a national population policy and the integration of population factors into development planning through the strengthening of the National Population Committee, a high-level permanent committee responsible for population activities in the country, headed by the Minister of the State Planning Commission (SPC); (b) to expand maternal and child health and family planning (MCH/FP) services on a nation-wide basis to reduce the total fertility rate (TFR) from its current level of 6.25 children per woman to 4.92 by the year 2000, with special emphasis on improving the country's MCH/FP management information system (MIS); (c) to integrate population education into technical and vocational education and agricultural extension programmes, and to establish a specialized population communication and information centre; (d) to intensify the integration of women into economic development; and (e) to improve population data collection and analysis.

3. All projects under the proposed programme, as in all UNFPA-assisted programmes, would be undertaken in accordance with the principles and objectives of the World Population Plan of Action; that is, that population policies should be consistent with internationally and nationally recognized human rights of individual freedom, justice and the survival of national, regional and minority groups (para. 14 (d)); that respect for human life is basic to all human societies (para. 14 (e)); and that all couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children, and to have the information, education and means to do so (para. 14 (f)).

II. BACKGROUND

4. Although the Syrian Arab Republic does not yet have a comprehensive population policy, statements of Syrian government officials indicate a high awareness of the need to integrate population variables into development plans.

In his message to the International Conference on Population, held in Mexico City in 1984, His Excellency President Hafez Al-Assad acknowledged that "the Government of the Syrian Arab Republic tried to solve the population problem through the integration of demographic variables into socio-economic development and dealing with population as an integral part of development planning on both the general and specific levels.... Socio-economic policy is expected to lead to several changes in demographic indicators in the near future. It will correct spatial distribution and eliminate unequal distribution of population among agricultural and other economic and social fields. On the other hand, the great improvement expected in education, especially for females, will affect fertility rates, and will result in the decline of annual population growth rates."

5. The Syrian Arab Republic faces the problems of rapid population growth, a high dependency ratio, uneven distribution of the population and other problems related to internal migration. According to government projections, the observed annual growth rate of population was 3.28 per cent for the period 1960-1970 and 3.35 per cent for 1970-1981. United Nations projections for 1990 estimate the population at 12.5 million and growing at the rate of 3.5 per cent annually. The crude birth rate is estimated at 41.7 per 1,000 population and the crude death rate at 5.7 per 1,000. Moreover, 48 per cent of the population is below 15 years of age. The increase in recent years in the proportion of young children and in the number of people aged 65 years and older has led to very high dependency ratio, which is currently estimated at 102.8 per cent. These problems have been compounded by the uneven distribution of the population, which has been greatly influenced by people's quest for work and for available sources of water. Population density varies widely throughout the country, ranging from a high of 239 people per square kilometre in the western region to a low of 30 per square kilometre in the central area.

6. The negative impact of the demographic situation on the country's economic and social development has become obvious. As a result, the Syrian Arab Republic is confronting serious problems in the fields of employment, education, nutrition and health care. At the current pace, the country's population will nearly double in 20 years, and then reach 32.3 million by the year 2025, according to United Nations estimates. The composition of the population is young and the fertility rate is high (estimated at 6.25 children per woman for the period 1985 -1990), the combination of which will increase the dependency ratio year by year. A steady migration of rural people to the five major cities -- Damascus, Homs, Aleppo, Hamma, and Latakia -- has contributed to an increase in the urban growth rate to 4.1 per cent per annum, which has in turn heightened pressure on already limited resources. This migration in pursuit of employment has, among other things, created an imbalance in the age structure in the rural areas. Other factors aggravating the country's population problems include the limited involvement of women in the development process and high illiteracy and school drop-out rates, particularly among women.

7. Several important events that have taken place since 1970 have adversely affected the Syrian Arab Republic's economy. For one thing, the 1973 war disrupted all public sector investments, such that the public sector share in total investments decreased from 71 per cent in 1970 to 51 per cent in 1987. For another, the stagnation of bilateral aid in the early 1980s and the burden of interest payments on foreign loans for financing development projects, coupled with a combination of low agricultural yields and inflationary pressures, led to a serious deterioration of the economy. The combined effect of a deteriorating economic situation and an increasingly problematic demographic situation has impressed on the Government the urgent need to integrate population variables into its development planning and to facilitate the implementation of the programme proposed by UNFPA.

8. In the Syrian Arab Republic, formal development planning in the form of five-year plans has been practiced since 1961. It was only with the country's fourth development plan (1976-1980), however, that demographic variables were included among the various sets of information used to formulate the plan. The fifth five-year plan (1981-1985) included population needs among its principal objectives, incorporating population concerns in its efforts to develop health care and education and to bolster the activities of popular volunteer organizations, such as the Workers' Trade Union, the Women's Union, and the Adult and Youth Unions. The fifth plan also focused on strengthening the Central Bureau of Statistics and the State Planning Commission as well as civil registration in general. The draft sixth five-year plan (1986-1990), which was prepared within the framework of long-term objectives to the year 2000, focused on developing human resources and on improving and expanding community and social services, among other things.

9. In formulating the 1991-1995 socio-economic development plan, a primary concern of planners was to create a balance between the supply and demand of employment, on the one hand, and to curb rural-to-urban migration on the other. To achieve these objectives, the State Planning Commission, among other strategies, emphasizes compulsory education for males and females up to the secondary level (9th grade), reform of the educational system, expansion of vocational training, and the increased participation of women in economic development. Supporting inputs include information, education and communication (IEC) activities, family planning services and agricultural reform. Government planners expect these measures to have a significant impact on the country's demographic situation, including an increase in the average age at first marriage for females and a reduction of the total fertility rate. To help curb rural-to-urban migration, the Government will seek to enhance the attractiveness of rural living by adopting measures such as agricultural reform, expansion of agro-industry, improvement of animal husbandry, development of existing rural industry and introduction of new industry, as well as the continued improvement of social services in rural areas.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

10. UNFPA's assistance to the Syrian Arab Republic began in the 1970s, with support to the Central Bureau of Statistics (CBS) in connection with the analysis of data from the 1970 population and housing census, and continued with the establishment of a Centre for Population Studies and Research. Such assistance was extended on a project-by-project basis until 1975.

11. Beginning in 1976, the Governing Council approved a UNFPA programme of assistance in the amount of $3 million for a period of four years (1976-1979). The first programme included support for the population research programme at the CBS, demographic data studies and analysis undertaken by the Directorate of Population and Manpower Planning of the State Planning Commission, a demographic teaching and research programme at the University of Aleppo and a study of the country's civil registration system. The objective of the first programme included: (a) the expansion and upgrading of basic health services, including MCH/FP services, through the development of a national MCH/FP demonstration and training centre in Damascus; (b) extension of MCH/FP services to other urban areas and to selected rural areas; and (c) strengthening of the population activities of the Women's Union.

12. On the basis of the findings and recommendations of the Basic Needs Assessment Mission that visited the Syrian Arab Republic in December 1979-January 1980, a second UNFPA-assisted programme in the amount of $9 million was approved by the Governing Council in June 1981 for the five-year period 1981-1985. The second programme expanded and consolidated some aspects of the first programme cycle. The activities undertaken were: (a) the strengthening and expansion of maternal and child health care, including training of health care personnel in preventive and community aspects of health care; (b) the conduct of the housing and population census of 1981; (c) the undertaking of training and research in population issues in the State Planning Commission; (d) the promotion of awareness among policy-makers of the relationship between population and development; (e) the introduction of population education in the formal school system and training in the production of materials for incorporating population education into the non-formal sector; and (f) the strengthening of government machinery to facilitate the implementation of policies concerning the improvement of the status of women.

13. Based on the recommendations of a Basic Needs Assessment Update Mission of March 1985, a third UNFPA-assisted programme (1986-1989) was approved by the Governing Council in June 1986 in the amount of $4 million. The Government, confirming its interest and support to the programme, contributed $800,000 to ensure the implementation of the proposed activities. The third programme was a continuation of the second programme, but with stronger emphasis on strengthening and expanding maternal and child health and family planning services on a nation-wide basis; generating data for the purposes of social and

economic development planning; increasing planners' knowledge of the interaction between demographic and socio-economic factors; and increasing the degree of awareness among policy-makers concerning the implications of population growth. New areas were given more attention during the programme such as population IEC; in-school population education; and integration of population awareness in adult literacy curricula.

Maternal and child health and family planning

14. The UNFPA-supported MCH/FP programme was quite successful. Under the programme, UNFPA was able to extend MCH/FP services progressively from a central-level pilot demonstration clinic in Damascus to a decentralized and extensive national network. Health care services were delivered through a system that now includes 351 urban and rural health centres, with family planning services offered in half of them. The success of the new family planning services was facilitated by the organization of health education activities, the recognition and acceptance by the Government of child-spacing as part of the health strategy, and the support of training of traditional birth attendants (TBAs) through itinerant training teams visiting various provinces periodically.

15. Because of the training of the TBAs in safe delivery of family planning and contraceptive methods and their exposure to the health benefits of family planning, statistics show that the number of acceptors increased by 30 per cent between 1986 and 1988, from 271,383 in 1986 to 289,428 in 1987 to 351,531 in 1988. Nearly 28 per cent of the new acceptors requested birth control pills. In this respect, efforts are being made to shift to safer, more effective methods, at the same time providing a wider choice of methods so as to decrease reliance on oral contraceptives. The current strategies of family planning programmes include consultation with local leaders, increased utilization of TBAs and working with a wide variety of organizations such as women's and youth groups and through literacy and agricultural extension programmes.

16. Despite its many accomplishments, the programme did encounter some difficulties. Study tours and fellowships were delayed because of difficulties in determining where to send the fellows and whether their language ability was adequate for such training. The weakness of the programme was revealed in the insufficient attention paid to the managerial process and in the ineffectiveness of the MCH/FP management information system, which was poorly organized and thus inefficient. There was also a significant delay in the implementation of the post-partum and maternity-centred family planning programme in the Faculty of Medicine of Damascus University. This was due primarily to a change in the project's National Director and to a plan which did not adequately describe the intended activities and the institutional modalities of collaboration between the Ministry of Health and the Ministry of Higher Education in overseeing university hospitals. As a result, little progress was made to improve obstetrical and neo-natal care in provincial hospitals.

Information, education and communication

17. The population education programme succeeded in placing great emphasis on introducing and strengthening population education in the formal and non-formal school system and in developing awareness among educators and the younger generation of the relationship between high population growth and socio-economic development. Government support to this programme was strong, as was evidenced by the implementation of several parallel population activities to complement the activities in the plan of action of the UNFPA-funded programme. These parallel activities included the publication of a regular population newsletter, the broadcast of a regular half-hour programme on population issues as an integral part of the educational television programme, and the dissemination of the results of population seminars and/or programmes to all the provinces and districts so that educators could benefit from such information.

18. However, a delay in the implementation of these activities was caused by the absence and/or frequent change of a full-time project director, as well as difficulties in identifying qualified and available consultants in population education in the Arab region to assist in finalizing the curricular materials such as national source books and teachers' training guides. Moreover, the efforts to introduce population education into the programme designed to eradicate illiteracy throughout the country encountered several serious constraints including the shortage of funds and a prevailing tradition against the enrolment of women in literacy classes. Nor was population education incorporated effectively into the curricula of technical and vocational schools and agricultural extension programmes.

19. In the information and communication area, UNFPA assistance started only in 1988. A core unit within the radio and television establishment is responsible for programmes concerned with health and family planning. The orientation of such programmes has, so far, generally been on birth spacing, breast-feeding and the use of birth control pills. However, the unit has been unable to convey in its programmes the connection between rapid population growth and quality of life.

20. In general, shortages of skilled personnel, material resources and adequate baseline data on media target groups and exposure have impeded the development of high quality IEC materials and programmes. The task of communicators has been made all the more difficult because of a shortage of data on the socio-cultural background of family planning target groups, as well as inhibitions surrounding reproductive behaviour, changes in sex roles, and improvements in the status of women and related issues.

Basic data collection and analysis

21. In the areas of population data collection and analysis, UNFPA assistance has been particularly relevant to the needs of the country. The generation of

data through the 1970 census was used primarily for awareness creation. Later, population data were used for analytical studies and specialized research. A set of guidelines and principal directives in the field of population was based on the findings and conclusions of a series of research studies on such topics as internal migration; labour force participation; population growth, structure and distribution; and health and nutrition, among others. After reviewing some of these analytical studies and research papers, the UNFPA mission noted the good quality of these documents. Yet, there was a considerable time lag between the collection and analysis of data. This was due generally to the limited ability of the staff responsible for data processing.

Population policy formulation

22. Although the basic elements of the institutional framework for the formulation of population policy exist in the Syrian Arab Republic, little progress has been made in this area. This is due in large part to the lack of co-ordination and absence of linkage among the organizations involved. The link between data users and operational procedures in the Syrian Arab Republic is good, and the Population Unit in the Ministry of State Planning Commission has been upgraded to the status of Directorate to enable it to maintain and expand contacts with all sectors. Also, training has generally benefited members of sectoral population units, although at times to the exclusion of staff of other ministries. Hence, the goal of strengthening the institutional capability of the Population Unit was not adequately accomplished. This was due to the fact that few training programmes had components specifically designed to strengthen the capabilities of the planners in the other sectors or to increase planners' understanding of the interrelationship between population and development.

Other external assistance

23. Among those organizations active in the Syrian Arab Republic in the field of population, either directly or indirectly, are the World Food Programme (WFP), the United Nations Children's Fund (UNICEF), the World Health Organization (WHO), and the International Planned Parenthood Federation (IPPF). There is no bilateral assistance for population activities in the country.

24. WFP has expressed a keen interest in developing close co-ordination with UNFPA and incorporating population concerns, such as family planning and population education, into its agricultural extension programme. WFP has also emphasized the need to strengthen the co-ordination among existing United Nations agencies in the country.

25. UNICEF assistance for the period 1982-1984 totalled nearly $1.5 million. Although UNICEF is engaged in such activities as immunization, oral rehydration therapy, the promotion of breast-feeding and the training of TBAs, birth spacing is given only cursory attention as a method of protecting children. Moreover,

there is no mention in programme documents of the interrelationship between population growth and its consequences on the welfare of the family and the society at large.

26. WHO's assistance to the Syrian Arab Republic from 1986 through 1989 averaged approximately $1 million per year. The approved budget for the 1990-1991 biennium is $2,279,800, to be used to support 21 projects dealing with health system infrastructure, science and technology, health promotion and health care, and disease prevention and control.

27. IPPF provides assistance to the Syrian Arab Republic through its affiliate organization, the Syrian Family Planning Association (SFPA). SFPA has now clearly identified its role as being complementary to the work of the Ministry of Health in the field of family planning and family health. The emphasis is on clinical service delivery and information/education activities. Information and education work is carried out through the production of educational materials and the use of mass media such as radio and film shows.

IV. PROPOSED PROGRAMME 1990-1994

28. The proposed UNFPA programme is based on an analysis of the country's population situation, the experiences of UNFPA's first three population programmes, and the findings and recommendations of the PRSD mission, which were officially endorsed by the Government. The strategy of the proposed programme, which has been designed to supplement and complement the national population programme and which reflects the concern of the Government to reduce population growth and improve the health of mothers and children through the reduction of fertility, would include: (a) enhancing awareness and creating a favourable attitude towards smaller family size through well-designed IEC activities; (b) meeting the demand created for family planning services; and (c) providing a wide range of safe and effective contraceptives.

29. The programme would also support the State Planning Commission (SPC) and the National Population Committee (NPC) in developing comprehensive, integrated multi-sectoral population policies. This would require incorporating inputs from other ministries, as well as governmental and non-governmental agencies. To do this effectively, the SPC and NPC must strengthen the institutional framework of the various organizations involved in population and development activities in the country. Within the framework of the national population policy, the strategy for IEC would be to develop a comprehensive, integrated programme which would include population education in the curricula of primary and secondary schools, as well as in technical, vocational, adult literacy, and agricultural extension programmes. This would be supported by information and communication strategies aimed at slowing down population growth and creating awareness of the interrelationship between population and development.

30. The PRSD mission recommended that the Government concentrate its population programme in the following sectors (in order of priority): policy development; MCH/FP, including an MIS component; information, education and communication; population dynamics; women, population and development; and data collection and analysis.

31. The UNFPA fourth programme of assistance would be implemented by various government agencies. The main goals and objectives of the programme would be: (a) to assist with the formulation of a national population policy and the integration of population variables into development planning; (b) to strengthen the country's overall institutional capacity and capability in the area of development planning; (c) to continue to support the expansion and diversification of family planning services to all health centres and maternity hospitals, emphasizing a community-participation approach, in order to increase contraceptive prevalence and to help reduce the total fertility rate; (d) to strengthen the administration and management of the MCH/FP programme and to improve the family planning management information system; (e) to continue to integrate population education into the curricula of secondary schools and to start introducing population education in technical and vocational education and in all educational activities for agricultural extension workers; (f) to support the establishment of a specialized population communication and information centre in the Ministry of Information; (g) to intensify the integration of women into economic development; and (h) to improve the accuracy and timely release of population data.

Maternal and child health and family planning

32. UNFPA would help the Government to expand and strengthen MCH/FP services on a nation-wide basis in order to increase contraceptive prevalence to a point where the total fertility rate will decrease from its current level of 6.25 children per woman to 5.41 by 1994 and to 4.92 in the year 2000. This would require, among other things, the strengthening of institutions and the development of human resources in the MCH/FP sector, as well as the extension of the service delivery infrastructure.

33. UNFPA would assist the Ministry of Health in its efforts to create district health centres as an intermediate-care level between the provincial hospital and peripheral services. The latter would be extended by utilizing traditional birth attendants as outreach workers within the framework of the public health centres. Furthermore, this activity would include a module for in-service training for the staff of the 351 health centres operated by the Ministry of Health to improve their capability in delivering quality MCH/FP services. Assistance would also include the provision of medical and clinical equipment to these centres, transport to ensure mobility of services, and adequate supervision.

34. UNFPA would provide support to strengthen the administration and management of the MCH/FP programme and improve the MCH/FP management information system. This would require a complete assessment of the MIS system so as to determine its capabilities and needs. The system would then be upgraded accordingly and operated by specialists capable of supervising the collection of data, analyzing the data collected and adapting these data according to the system of decentralized target-setting. The management process would be improved and guided by the systematic use of well-conceived surveys on such indicators as contraceptive prevalence, continuation rate, and knowledge, attitude, and practice and (KAP).

35. Other areas of concern would be increasing the supply of contraceptives and upgrading the logistics for the family planning programme. Reaching the fertility targets set for 1994 and for the year 2000 presupposes the availability and regular flow of contraceptive supplies nation-wide. In order to achieve the required shift towards more effective contraceptive methods, it is estimated that $2.8 million would be needed to provide the contraceptives, including the introduction of NORPLANT and injectables, among others, as well as the training for staff.

36. The IEC Unit in the MCH/FP Directorate would require assistance in its efforts to strengthen the monitoring of the IEC activities, and to pre-test health education materials and evaluate their effectiveness. Also, under the proposed programme, the prenatal and family planning services initiated at the University of Damascus would be enhanced and extended to the obstetrics and gynaecology (OB-GYN) departments in the hospitals of the medical schools of Damascus, Aleppo and Latakia Universities. Indeed, improving maternal and family planning services within the framework of safe motherhood would necessitate a strengthening of the teaching and research capabilities of the OB-GYN departments, as well as an involvement of the universities in the technical support of maternity services at the provincial level.

37. For the activities in the MCH/FP sector, UNFPA proposes to provide $6 million. This would cover equipment, teaching aids, training, fellowships, short-term consultancies, and vehicles. The various activities would be implemented by the Ministry of Health and the Ministry of Higher Education and executed by WHO and UNFPA.

Information, education and communication

38. UNFPA would support the introduction and extension of population education at various levels of the formal and non-formal educational system including vocational training institutions and agricultural extension services. The proposed assistance would also support the implementation of nation-wide communication and information programmes as well as the establishment of a national population information centre in the Ministry of Information.

39. Activities in support of formal and non-formal population education would include: (a) extension of population education to technical and vocational institutes as well as the continuation of population education in the primary and secondary school systems; (b) extension of population awareness to adult literacy and social education programmes; (c) integration of population education as well as population dynamics and family planning into the curricula at the Faculties of Medicine at Damascus and Aleppo Universities; and (d) introduction of population education into agricultural extension services.

40. In the communication sector, the recommended activities would be: (a) support for the establishment of a national population information centre at the Ministry of Information; and (b) strengthening of the Documentation Unit in the Syrian Parliament. The primary responsibility of the newly created National Population Information Centre, in addition to co-ordinating population information programmes and activities at the Ministry of Information, would be to develop a national strategy for population and related issues; to evaluate, improve and upgrade the different mass media programmes with a view to strengthening awareness creation; and to make use of different channels of communication to disseminate information about population education and related issues with the aim of increasing Syrians' acceptance of the small family norm.

41. UNFPA proposes to provide $1.3 million to cover international consultancy services, training, equipment, administrative support, and the provision and publication of textbooks, in particular teacher training guides and resource books. The Ministries of Education, of Higher Education, of Information and of Culture would be responsible for implementing the various components of the IEC programme. UNESCO, FAO, WHO, and UNFPA would serve as executing agencies as and when appropriate.

Basic data collection and analysis

42. UNFPA would assist the Government in improving the quality of population data and ensuring its timely dissemination. Such data would provide government officials and development planners with a valuable base of information for formulating policies, integrating population variables into development planning, and monitoring, evaluating and analyzing the implementation of population policies, programmes and activities. Special attention would be given to the development of sound procedures for the collection, analysis, evaluation and dissemination of population data, including various aspects of fertility determinants as well as family planning service statistics. The following activities would also be supported in this sector: (a) collection of basic population data including preparations for and the conduct of the 1991 Population and Housing Census; (b) improvement of the system of vital statistics; (c) the undertaking of a sample survey on aspects of fertility determinants as well as family planning service statistics; (d) development and management of a population database; (e) provision of technical assistance for analysis and publication of census results; and (f) improvement of civil registration on a pilot scale.

43. UNFPA would provide $900,000 to this sector covering training, equipment, and publication of census and survey results. The State Planning Commission and the Central Bureau of Statistics would implement the activities. The United Nations and UNFPA would serve as executing agencies as and when appropriate.

Population policy formulation

44. In line with the expressed concern of the Government, UNFPA accords high priority to the formulation of a national population policy. The proposed UNFPA assistance would seek to strengthen the capability of the National Population Committee within the State Planning Commission, which is chaired by the Minister of Planning. The overall institutional capacities of the Directorate for Population Planning and Manpower and the Directorate of Scientific and Technical Co-operation, which will serve respectively as technical office and secretariat of the National Population Committee, would be strengthened in order to help the Government formulate and implement a national population policy. One of the primary aims of UNFPA assistance to this sector would be to enable the State Planning Commission and the National Population Committee to develop a comprehensive, integrated multi-sectoral population policy with quantifiable objectives and targets. The SPC would be the focal agency responsible for guiding the development and co-ordination of policy and for monitoring and evaluating the policy and programmes.

45. UNFPA's assistance to this sector would be $500,000 to cover the cost of international consultants, training, equipment, and administrative support, among other things. The State Planning Commission and the National Population Committee would implement this component of the programme, with the United Nations serving as the executing agency.

Population dynamics

46. UNFPA assistance to this sector would focus on introducing instruction on the interrelationship between population and development at the university level. The primary objective would be to expose graduates, many of whom will staff various sectoral ministries, to the complex relationship between population and development issues. UNFPA proposes assistance in the amount of $300,000 to cover the costs of introducing such activities at the Universities of Damascus and Aleppo. The Ministry of Higher Education and the Universities of Damascus and Aleppo would implement this component, with the United Nations serving as executing agency.

Women, population and development

47. UNFPA would assist the Syrian Government in its efforts to improve the status and condition of Syrian women, as stipulated in the national development plan. UNFPA would support special activities for enhancing the status of women such as: (a) undertaking research in support of policy formulation; (b)

strengthening the capability of women's organizations to plan, monitor and evaluate women's projects; and (c) supporting income-generating activities specially designed to meet the needs of women. UNFPA proposes to provide $700,000 to cover this sector. Appropriate institutions such as the Women's Union would be responsible for implementing the various activities. UNESCO, the ILO and FAO would serve as executing agencies.

Programme reserve

48. A reserve of $300,000 would be set aside to meet unforeseen needs that may arise during the period of the programme (1990-1994).

Programme co-ordination

49. The Directorate of International Co-operation at the State Planning Commission is responsible for mobilizing and co-ordinating all external assistance to the country. With regard to UNICEF and the World Food Programme, the directors of the respective programmes in the Syrian Arab Republic have expressed an interest in developing a close co-ordination of inputs and activities with UNFPA. For its part, WFP has recommended incorporating population concerns into the agricultural extension programmes it supports.

Programme monitoring, evaluation and management

50. In addition to the standard monitoring and evaluation procedures, which include project progress reports, field monitoring visits, tripartite reviews, and a mid-term review, all projects would also have built-in monitoring and evaluation components. The major projects would be evaluated independently, usually at the mid-point of the programme.

51. On the part of UNFPA, since there is no UNFPA Country Director in the Syrian Arab Republic, the proposed programme would initially be managed by a National Programme Officer, who would be assisted by a secretary. The UNDP Resident Representative, who also serves as the UNFPA Representative, would provide guidance and promote co-ordination with other United Nations agencies. In view of the importance of the proposed programme, UNFPA is considering strengthening its field office with the recruitment of additional staff, as may be required.

Financial summary

52. As indicated in paragraph 1, UNFPA proposes a programme in the amount of $10 million for period 1990-1994. The breakdown by sector is as follows:

	UNFPA regular resources
	$
Maternal and child health and family planning	6,000,000
Information, education and communication	1,300,000
Data collection and analysis	900,000
Population policy formulation	500,000
Population dynamics	300,000
Women, population and development	700,000
Programme reserve	300,000
TOTAL	10,000,000

V. RECOMMENDATION

53. The Executive Director recommends that the Governing Council:

(a) Approve the programme for the Syrian Arab Republic in the amount of $10 million for the five-year period 1990-1994;

(b) Authorize the Executive Director to allocate the funds and to make appropriate arrangements with the Government of the Syrian Arab Republic and with the executing agencies.